NHS Resolution

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23 December 2025

REF: SHA/26666

APPEAL AGAINST GREATER MANCHESTER ICB DECISION TO REFUSE AN APPLICATION BY PRESCRIPTION HUB LTD FOR INCLUSION IN THE PHARMACEUTICAL LIST OFFERING UNFORESEEN BENEFITS UNDER REGULATION 18 AT MOSLEY COMMON, WIGAN, M29

1 Outcome

1.1 The Pharmacy Appeals Committee ("Committee"), appointed by NHS Resolution, quashes the decision of the Commissioner and redetermines the application.

1.2 The Committee determined that the application should be refused.

A copy of this decision is being sent to:

Healthcare Plus Consulting Ltd on behalf of Prescription Hub Ltd
Pharmacy Sales and Consultancy on behalf of Davina Pharmacy
Community Pharmacy Greater Manchester
PCSE on behalf of Greater Manchester ICB

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1 The Application

By application dated 26 January 2025, Prescription Hub Ltd ("the Applicant") applied to Greater Manchester ICB ("the Commissioner") for inclusion in the pharmaceutical list offering unforeseen benefits under Regulation 18 at Mosley Common, Wigan, M29 [map covering best estimate area provided to Committee]. In support of the application it was stated:

1.1 In response to "In my/our view this application should not be refused pursuant to Regulation 31 for the following reasons" the Applicant stated:

1.1.1 "N/a.

1.1.2 There is no pharmacy trading from or adjacent to the proposed premises, so Regulation 31 does not apply."

Supporting information

"Background

1.2 This application is in respect of opening up a new pharmacy in order to provide better access for patients requiring access to pharmaceutical services in Mosley Common, Wigan. Specifically, residents of the Wigan 029C Lower-Layer Super Output Area (LSOA); the Wigan 029D LSOA; the Wigan 025E LSOA; and the surrounding areas.

1.3 The best estimate of the proposed site we wish to open a new pharmacy is located on/near Parr Bridge Retail Park, M29 8RZ. We consider that the area is delineated by the Guided Busway to the North; and the major A580 to South, making alternative pharmaceutical provision difficult to access for those residing near the proposed site. Indeed, there is a sign marked 'Welcome to Mosley Common' for those leaving the A580 and travelling along Mosley Common Road into Mosley Common.

1.4 According to the 2019 index of multiple deprivation, the Wigan 029D LSOA is amongst the top 20% most deprived LSOAs in the country. It is well documented that health needs are greater in deprived areas. When we also consider the pressure that the primary care network currently faces, it is

imperative that this application is granted to support the current healthcare network and provide pharmaceutical aid for those in need.

1.5 Mosley Common has seen rapid growth in recent years, in both housing and community offerings.

1.6 According to 2011 Census data, the population of Mosley Common has approximately 3200 residents, representing a reasonably sized village with basic amenities that would be expected of any village location:

1.6.1 A hairdresser

1.6.2 A Chinese Takeaway

1.6.3 A Sushi restaurant

1.6.4 An Off-licence

1.6.5 A Pizza Takeaway

1.6.6 A Bar

1.6.7 Two Primary Schools

1.7 However, Mosley Common has seen rapid housing and population growth in recent years through a number of housing developments that have now completed:

1.7.1 Bridgewater View Development c.440 new homes

1.7.2 Garrett Manor & Associated Developments: c.340 new homes

1.7.3 Bellway Homes: c.150 new homes

1.8 All developments have consisted of family homes and, even at conservative levels, we estimate that there are at least 2700 new residents surrounding the proposed site. This has caused the population of Mosley Common to almost double in just over a decade; representing an approximate 85% population increase in 13 years.

1.9 For context, the UK usually sees a 0.3% annual growth rate for the population; thus, 85% growth over a thirteen-year period represents a drastic change in population.

1.10 In order to sustain such a burgeoning population a number of additional amenities have been erected in line with housing developments, all within the Parr Bridge Retail Park:

1.10.1 Parr Bridge Health & Wellbeing Centre, which houses Boothstown Medical Centre. As of September 2023, this surgery had a list size of 7467 patients and dispensed approximately 9,500 items per month.

1.10.2 A Lidl Supermarket

1.10.3 A Starbucks Coffee Shop

1.10.4 A 24/7 gym

1.10.5 A Greggs

1.10.6 A Subway

1.10.7 A Charity Shop

1.10.8 A Tanning Salon

1.10.9 A Nursery & Pre-School

1.11 It is apparent that Mosley Common has become a self-sustaining community where residents access all amenities as part of their day to day lives. However, pharmaceutical provision is still lacking, and residents must endure separate one-off journeys to access their local pharmacy. We do not consider this to represent reasonable choice or access to pharmaceutical provision.

1.12 This is especially pertinent when we consider that planning permission for a further 1000 new family homes has been granted in Mosley Common, with a further population increase of 2700 residents expected – causing the wider population to swell to approximately 8500 residents.

1.13 The formation of the retail hub means amenities are not only accessed by residents of Mosley Common, but also by residents of surrounding villages. Boothstown, Ellenbrook, and Astley are surrounding villages that are not currently served by any large supermarkets. Many residents are likely to access the retail hub, especially the Lidl Supermarket, for their day-to-day needs. The combined population of these villages is c.18,000 people and provides a scale of the extra demand placed upon services in Mosley Common.

Proposed Location

1.14 The proposed location is situated on/near the numerous amenities in Parr Bridge Retail Park, including a Lidl Supermarket and the Parr Bridge Health & Wellbeing Centre. There is ample parking and wide walkways to access local services.

1.15 The map overleaf [provided to Committee] illustrates the location of the Proposed site, and the location of alternative pharmaceutical provision.

1.16 We can see that the arbitrary marker for the proposed site, M29 8RZ, fills a geographical gap in pharmaceutical provision. It is also apparent how Mosley Common is delineated by E Lancashire Road to the South/ the Guided Busway to the North.

1.17 Site images [provided to Committee]

Regulations

1.18 We are required by NHS England to address the overarching question in an Unforeseen Benefits application:

"Please describe the unforeseen benefit(s) that you are offering to secure and how it will secure improvements or better access to pharmaceutical services, or pharmaceutical services of a specified type in the HWB area".

1.19 When considering the above question, the provisions of Regulation 18(2)(b) should be noted:

(b) whether, notwithstanding that the improvements or better access were not included in the relevant pharmaceutical needs assessment, it is satisfied that, having regard in particular to the desirability of—

(i) there being a reasonable choice with regard to obtaining pharmaceutical services in the area of the relevant HWB (taking into account also the NHSCB's duties under sections 13I and 13P of the 2006 Act(b) (duty as to patient choice and duty as respects variation in provision of health services)),

(ii) people who share a protected characteristic having access to services that meet specific needs for pharmaceutical services that, in the area of the relevant HWB, are difficult for them to access (taking into account also the NHSCB's duties under section 13G of the 2006 Act(c) (duty as to reducing inequalities)), or

(iii) there being innovative approaches taken with regard to the delivery of pharmaceutical services (taking into account also the NHSCB's duties under section 13K of the 2006 Act(a) (duty to promote innovation)),

granting the application would confer significant benefits on persons in the area of the relevant HWB which were not foreseen when the relevant pharmaceutical needs assessment was published;

1.20 We note that points on reasonable choice; protected characteristics; and innovation are desirable, however, they are merely supporting considerations when determining whether in fact the overarching test in regulation 18(2)(b) has been met: an application should be granted should it provide improvements or better access to pharmaceutical services, or pharmaceutical services of a specified type in the HWB's area.

1.21 We have addressed these regulations overleaf.

Patient Journeys

1.22 Above we identified approximately 6,000 residents of the aforementioned LSOAs who would likely access pharmaceutical services at the proposed site. We also identified 18,000 residents who live outside of Moseley common but would likely utilise the facilities within the Retail Park. When considering securing better access, we must consider what a typical patient journey would look like.

1.23 We also consider the reasonable choice within these journeys, alongside how those with protected characteristics find those journeys.

1.24 Using M29 8RZ as an arbitrary marker to represent these residents; we can see that the next nearest pharmacy, is the Tims & Parker Pharmacy, M28 1FB, which is 1 mile away. It must be noted that distance in itself is a barrier to access. For residents currently residing near the proposed site, alternative pharmaceutical services are difficult to access by foot, car, and public transport.

1.25 When assessing patient journeys, it is important to note the significance of the proposed location being adjacent to the Boothstown Medical Centre. Currently, those accessing pharmaceutical services in connection with a visit to the GP, have two journeys to make: the first to the GP practice, and the second to the pharmacy. This should be kept in mind for the scenarios below.

By Foot from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy, M28 1FB)

1.26 As can be seen from the map on the following page [provided to Committee], this journey is 1 mile or 23 minutes, equating to a 46-minute round-journey.

1.27 We cannot consider a 2-mile round walk to access pharmaceutical services as sufficient access, nor can we consider this as having a reasonable choice to pharmaceutical services. In fact, for residents near the proposed site, we would consider this as no pharmaceutical choice at all, much less than the threshold of 'reasonable choice'.

1.28 For patients that first must walk to access GP services at Boothstown Medical Centre, an additional 1 mile walk to access pharmaceutical services can be considered poor access and not representative of reasonable choice. Further, such an extended journey may prove difficult for the elderly, disabled, or parents with young children. Groups with protected characteristics do not have sufficient access by foot.

1.29 When we also consider the high deprivation of the local population, it is not unreasonable to interpret that walking will be the preferred mode of transport for the majority of residents due to the cost barrier that car travel and public transport may present.

1.30 It follows that other pharmaceutical provision is also not accessible by foot on account of the greater distances involved, and thus there is a lack of reasonable choice and access to pharmaceutical services for those travelling by foot.

1.31 We note that residents in Moseley Common living to the West of the proposed site experience an even longer journey to access pharmaceutical services. Some residents have to endure a 2.8 mile or 1 hour 2-minute round journey to access alternative pharmaceutical provision. Again, this is even less accessible than the journey above. Granting this application would cut this journey length and time by two thirds – a significantly more accessible trip.

By Car from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy, M28 1FB)

1.32 The journey by car to the next nearest pharmacy, M28 1FB, can be a 14-minute one-way journey during busy traffic hours.

1.33 Again, we cannot consider a 28-minute round drive to access pharmaceutical services as sufficient access, nor can we consider this as having a reasonable choice to pharmaceutical services.

1.34 We also note that this Pharmacy is not located in a substantial retail centre and thus residents are likely to have to make special journeys just to access pharmaceutical provision at this location. Again, this is likely to present a barrier to residents in Mosley Common due to associated petrol costs. In particular, this creates issues for residents wanting to access services other than that of dispensing, such as Pharmacy First or Hypertension. Residents may be deterred from accessing these services due to the travel costs involved, causing conditions to worsen and putting further strain on the primary care network. Granting this application would introduce reasonable choice and eliminate the current barriers to access by car.

By Public Transport from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy, M28 1FB)

1.35 The journey by bus to Tims & Parker Pharmacy is not the best served by public transport. Residents would obtain the No.132 bus from outside the Proposed Site and alight at the Boothstown Precinct bus stop. The journey in itself is an 8-minute one-way journey; however, the bus is infrequent and only operates every half an hour. Once a patient has arrived at a pharmacy, they could be waiting up to an hour for the return journey. Clearly this does not provide adequate access to pharmaceutical services, especially when we consider that the return journey by foot is also inaccessible.

1.36 Such poor choice of pharmaceutical access is felt especially by the elderly and disabled. These patient groups could face having to wait 30 minutes for a return bus in the cold on a winter's day. When we consider that these patients may not be able to drive, or even may not feel comfortable driving in winter conditions; alongside their inability to walk the long 1-mile distance back home, it is obvious that alternative pharmaceutical provision is inadequate and such scenarios stem from a lack of reasonable choice.

1.37 We also note that the bus fares could also present a barrier to accessing pharmaceutical services given the large, deprived population residing in Mosley Common.

Conclusion

1.38 In our view, the significant construction and population growth within Mosley Common has created a need for pharmaceutical services in the area. Coupled with the extra 1000 new homes that are set to be built, as well as the pockets of deprivation that exist; it is clear that there is a need for a pharmacy so residents can access medication and also important service such as Pharmacy First within the course of their daily lives.

1.39 Granting this application would secure better access to pharmaceutical services. The elderly, disabled, and the wider population are likely to find the proposed pharmacy significantly more accessible than alternative choices. It would also introduce reasonable choice to pharmaceutical services for those in the local area, when we consider that the nearest pharmacy is 1 mile away.

1.40 On the evidence outlined above, we believe that a new pharmacy contract should be granted."

2 The Decision

The Commissioner considered and decided to refuse the application. The decision letter dated 13 June 2025 states:

[Any reference to 'Committee' in this section is not to be confused with the Pharmacy Appeals Committee of NHS Resolution]

2.1 "Greater Manchester ICB has considered the above application and I am writing to confirm that it has been refused. Please see the enclosed report for the full reasoning."

Extract from the NHS Greater Manchester Integrated Care (NHS GM) Pharmaceutical Services Regulations Committee (PSRC)

2.2 "Name of Applicant: Prescription Hub Ltd

2.3 Fitness to practise: cleared for inclusion

2.4 Best estimate of proposed premises: Mosley Common, Wigan, M29 (specification location to be finalised)

2.5 Status of location: Not a controlled locality

2.6 Relevant regulations and Guidance:

2.6.1 Regulations 18 and 19 – unforeseen benefits: additional matters and consequences applies

2.6.2 Regulation 31 – refusal: same or adjacent premises

2.6.3 Regulation 32 – deferral arising out of LPS designations – N/A, no LPS designation

2.6.4 Regulations 40 to 44 – applications in a controlled locality – N/A, non-controlled locality

2.6.5 Regulation 50 – gradualisation for doctors - N/A in respect of this application

2.6.6 Regulation 65 – core opening hours conditions - N/A, no core opening hours conditions

2.6.7 Regulation 66 – conditions relating to providing directed services. – N/A, no directed services conditions relating to providing directed services – PSRC to note that despite the application form template explicitly instructing the applicant only to list advanced and/or enhanced services and not to include services which are not commissioned by NHSE or the ICB, the applicant has listed a number of services which are commissioned by the Local Authority/Council or other commissioners.

2.6.8 Paragraph 31, schedule 2 – conditional grant of applications where the address of the premises is unknown -applies as the applicant has proposed a best estimate address.

Additional information

2.7 Initial additional matters considered. Was the NHS Greater Manchester Pharmaceutical Services Regulations Committee (PSRC) satisfied that:

2.8 It would be desirable to consider, at the same time as this application, applications from other persons offering to secure the same improvements or better access?

2.9 Noting that there are no other applications in process for this best estimate location and that the PSRC did not wish to invite other applications, the PSRC determined it would not.

2.10 Another application offering to secure the same improvements or better access has been submitted and it would be desirable to consider it at the same time as this application?

2.11 The PSRC noted this was not applicable, as there are no other applications offering the same improvements or better access.

2.12 An appeal relating to another application offering secure the same improvements or better access is pending, and it would be desirable to await the outcome of that appeal before considering this application?

2.13 The PSRC noted this was not applicable, as there are no other applications offering the same improvements or better access and therefore no pending appeals.

2.14 Regulation 31 – Must the application be refused?

2.15 The proposed site identified in the application is Mosley Common Wigan M29 (specific location to be finalised).

2.16 The PSRC considered all available information, noting that there are no other pharmacy premises either adjacent or in close proximity to the best estimate address provided.

2.17 At the time of consideration of this application, the nearest Community Pharmacies to the proposed best estimate location, according to NHS website, are Well Pharmacy (0.3 miles away), Allied Pharmacy Astley (0.3 miles away) and Manor Pharmacy (1.2 miles away), via the nearest practicable routes: Pharmacies near M29 - NHS

2.18 No, the application is not to be refused under Regulation 31.

2.19 Due to the distance between the best estimate address and next nearest pharmacies (0.3 miles), the PSRC was satisfied that a refusal under Regulation 31 would not be appropriate.

2.20 Regulation 32 – Is the application to be deferred?

2.21 Based on all available information, the PSRC considered there were no reasons to justify deferral of the application.

2.22 Regulation 41 – Is the relevant location in a reserved location?

2.23 The PSRC noted the relevant location is not in a reserved location.

2.24 Regulation 44 – Prejudice test

2.25 The PSRC was satisfied that this test did not apply as it relates only to controlled localities/reserved locations. The proposed location is neither in (or within 1.6km of) a controlled locality, nor is it in a reserved location.

2.26 Regulation 18(1) – does the need on which the applicant based its application satisfy the elements of Regulation 18(1)?

2.27 In support of his application, the applicant has provided the following supporting information: [as set out above in Section 1]

2.28 The supporting information highlights the following points:

2.28.1 The application offering "better access" as a result of the significant construction with extra 1000 new homes that are set to be built. Advises that Mossley Common specifically is amongst the most deprived areas in England (source: 2019 IMD) "*According to the 2019 index of multiple deprivation, the Wigan 029D LSOA is amongst the top 20% most deprived LSOAs in the country*".

2.28.2 *All developments have consisted of family homes and, even at conservative levels, we estimate that there are at least 2700 new residents surrounding the proposed site. This has caused the population of Mosley Common to almost double in just over a decade*;"

2.28.3 Confirms the location of the best estimate and transport links/access.

2.28.4 Page 7 "Using M29 8RZ as an arbitrary marker (**this is not factually correct as the applicant has confirmed that he wants to specify the best estimate as "Mosley Common, Wigan, M29**) to represent these residents; we can see that the next nearest pharmacy, is the Tims & Parker Pharmacy, M28 1FB, *which is 1 mile away. It must be noted that distance in itself is a barrier to access. For residents currently residing near the proposed site, alternative pharmaceutical services are difficult to access by foot, car, and public transport*". [emphasis added by the Commissioner]

2.28.5 Map included as provided to the Committee in Appendix A.

2.28.6 By Public Transport from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy M28 1FB)

2.28.7 The journey by bus to Tims & Parker Pharmacy is not the best served by public transport. Residents would obtain the No.132 bus from outside the Proposed Site and alight at the Boothstown Precinct bus stop. The journey in itself is an 8-minute one-way journey; however, the bus is

infrequent and only operates every half an hour. Once a patient has arrived at a pharmacy, they could be waiting up to an hour for the return journey. Clearly this does not provide adequate access to pharmaceutical services, especially when we consider that the return journey by foot is also inaccessible.

2.28.8 Such poor choice of pharmaceutical access is felt especially by the elderly and disabled. These patient groups could face having to wait 30 minutes for a return bus in the cold on a winter's day. When we consider that these patients may not be able to drive, or even may not feel comfortable driving in winter conditions; alongside their inability to walk the long 1-mile distance back home, it is obvious that alternative pharmaceutical provision is inadequate and such scenarios stem from a lack of reasonable choice.

2.28.9 We also note that the bus fares could also present a barrier to accessing pharmaceutical services given the large, deprived population residing in Mosley Common.

Conclusion

2.28.10 In our view, the significant construction and population growth within Mosley Common has created a need for pharmaceutical services in the area. Coupled with the extra 1000 new homes that are set to be built, as well as the pockets of deprivation that exist; it is clear that there is a need for a pharmacy so residents can access medication and also important service such as Pharmacy First within the course of their daily lives.

2.28.11 Granting this application would secure better access to pharmaceutical services. The elderly, disabled, and the wider population are likely to find the proposed pharmacy significantly more accessible than alternative choices. It would also introduce reasonable choice to pharmaceutical services for those in the local area, when we consider that the nearest pharmacy is 1 mile away.

2.28.12 On the evidence outlined above, we believe that a new pharmacy contract should be granted."

2.29 In addition, the applicant has submitted the following:

2.29.1 "We note that points on reasonable choice; protected characteristics; and innovation are desirable, however, they are merely supporting considerations when determining whether in fact the overarching test in regulation 18(2)(b) has been met: an application should be granted should it provide *improvements or better access to pharmaceutical services, or pharmaceutical services of a specified type in the HWB's area*."

2.30 Are there any other pharmacies or DACs in the area and what services do they provide?

2.31 The PSRC noted that the applicant is proposing 44 core/total opening hours.

2.32 The 44 core/total hours proposed are:

2.32.1 Monday to Friday (inclusive): 09:00 - 13:00 & 14:00 - 18:00

2.32.2 Saturday 09:00 - 13:00, Sunday closed

2.33 The PSRC noted that the pharmacies identified as interested parties within 2km of the proposed best estimate location Pharmacies near M29 - NHS are already providing services as identified above with most open till 6pm on week days and with Elliott Street Pharmacy till 9:30pm on 6 out of 7 days Contact details and opening times - Elliott Street Pharmacy - NHS i.e. significantly longer opening hours than the ones proposed by the applicant.

Well	1 Coldalhurst Lane	Astley, Tyldesley	Manchester	M29 7BS
Allied Pharmacy Astley	391 Manchester Road	Astley, Tyldesley	Manchester	M29 7BY
Manor Pharmacy	12 The Ctr, Richmond Dr	Higher Folds	Leigh	WN7 2ST
Elliott Street Pharmacy	177 Elliott Street	Tyldesley	Manchester	M29 8DR
Davina Pharmacy	155 Elliott Street	Tyldesley	Manchester	M29 8FL
Cohens Chemist	147 – 149 Elliott Street	Tyldesley	Manchester	M29 8FL

2.34 In summary, the applicant is offering fewer opening hours than are already available to patients in the locality from existing pharmacies, and no additional services than those already accessible.

2.35 PSRC noted that there have been no patient complaints received regarding access to services or distance to the next nearest pharmacies.

2.36 The applicant is proposing to provide the following services in the table below. The PSRC noted that the applicant has listed a number of services which are not Advanced or Enhanced Services (i.e. commissioners of those services are not NHS England or the ICB), and all services would be subject to the commissioner agreeing to commission those services from the pharmacy and/or the applicant meeting the requirements of the service specifications/SLAs.

2.37 The applicant states they are accredited to provide the services, but the premises are not accredited as premises have not yet been identified.

Service	Accredited to provide (Y/N/NA)	Premises accredited to provide (Y/N/NA)
Supervised consumption	Y	N
Smoking cessation	Y	N
COVID – 19	Y	N
Flu vaccination	Y	N
Pharmacy Contraception Service	Y	N

Hypertension	Y	N
New Medicine Service (NMS)	Y	N
Palliative Care	Y	N
Pharmacy First	Y	N
Mar Chart	Y	N
NMR Vaccine	Y	N
Needle & Syringe Provisions	Y	N
Emergency Hormonal Contraception	Y	N
Inhaler Technique	Y	N
Minor Ailments	Y	N
NRT	Y	N

2.38 There is therefore no floorplan available currently to review to identify whether there is a compliant designated consultation room.

2.39 Shape Atlas information indicates that neither Mossley [sic] Common nor the Astley area which the applicant also mentions in his submissions are more than 10% deprivation areas: [map provided to Committee]

2.40 Only when the bar is raised to "high 20% core20 population" as the index of multiple deprivation highlight, only Mossley [sic] Common (not Astley and other nearby villages) comes up as a deprived area: [map provided to Committee]

2.41 PSRC noted the contents of Wigan PNA: Pharmaceutical Needs Assessment

2.42 Wigan HWB has not identified a gap/need as per the current PNA and concluded that existing pharmacies currently provide adequate choice in terms of contractor, location, services and opening hours.

2.43 The report on consultation Pharmaceutical Needs Assessment - Report on consultation includes one remark about supervised consumption service being in high demand and issue with its provision as per below screenshot: [map provided to Committee]

2.44 The comment received from Wigan HWB:

2.45 Wigan Council comment:

"RE: CAS-349206-C6R7W9 - Application offering unforeseen benefits at Mosley Common, Wigan, M29 by Prescription Hub Ltd

We are writing to make a written representation on behalf of Wigan Health and Wellbeing Board and NHS Greater Manchester (Wigan), regarding the application offering unforeseen benefits at Mosley Common, Wigan, M29 by Prescription Hub Ltd.

We note that a best estimate of the proposed site for new pharmacy is provided, as premises located on/near Parr Bridge Retail Park, M29 8RZ have not yet been secured. We also note that for NHS Greater Manchester to decide whether to approve the application, Prescription Hub Ltd needs to prove that a new pharmacy would provide "significant benefits in terms of providing better access to and choice of pharmaceutical services".

The panel may wish to consider the following information in relation to the unforeseen benefits application.

Feedback is provided based on the current 2022 Wigan Borough Pharmaceutical Needs Assessment (PNA). The 2022 PNA is currently under review for publication later in the year and will consider any changes to housing development which may impact on the need for additional access to or choice of pharmaceutical services.

The existing Wigan Borough PNA considered the population demographics, housing projections and the distribution of pharmacies across the Borough and it was considered that the current pharmaceutical service providers would be sufficient to meet local needs over the lifetime of the PNA.

The PNA also considered the provision of pharmaceutical services across the Borough and outside of the health and wellbeing board area which secure improvements or better access to other pharmaceutical services, specifically in relation to the demography and health needs of the population. It identified that current provision of pharmaceutical services offered by both community pharmacies and other health care providers met the needs of the population of Wigan Borough. The PNA did not identify any services which were not provided in the health and wellbeing board area that would secure improvements or better access to pharmaceutical services.

The applicant states that pharmaceutical provision is lacking in the area of Mosley Common and that granting the application would secure better access to pharmaceutical services. We are not aware of any feedback regarding concerns about the current access to pharmacy services within the existing service delivery footprint (SDF) described in the PNA.

The PNA describes pharmacy services as being well distributed throughout the SDF around the main areas of population with 2 pharmacies just over the border in a neighbouring health and wellbeing board area. Pharmacies in the SDF have parking either on site or nearby and are accessible by public transport. Delivery services are provided to support those people less able to travel to the pharmacy. Existing pharmacies provide a wide range of advanced, enhanced and locally commissioned services. If it is assumed that most people would likely travel to Parr Bridge retail park by car or public transport, it could be assumed that they would also be able to travel to a pharmacy if required.

The applicant has proposed core and supplementary opening hours between 9am and 6pm Monday to Friday and between 9am and 1pm on a Saturday. The pharmacy would be closed all day Sunday. Currently, access to pharmacy services within the SDF is available 7 days a week from early in the morning to late at night due to there being provision from a pharmacy with extended contractual hours ('100 hour' pharmacy). In the event that the application is successful, we would request that opening hours should include service provision on Saturdays and Sundays to ensure residents visiting the retail park would have access to pharmacy services 7 days a week.

Should you require any further information on this representation, please contact the Wigan Locality Medicines Optimisation Department".

2.46 Regulatory Test

2.47 The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, as amended, state:

"Unforeseen benefits applications: additional matters to which the NHSCB must have regard

2.48 18.—(1) If –

(a) the NHSCB receives a routine application and is required to determine whether it is satisfied that granting the application, or granting it in respect of some only of the services specified in it, would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in the area of the relevant HWB; and

(b) the improvements or better access that would be secured were or was not included in the relevant pharmaceutical needs assessment in accordance with paragraph 4 of Schedule 1, in determining whether it is satisfied as mentioned in section 129(2A) of the 2006 Act(5) (regulations as to pharmaceutical services), the NHSCB must have regard to the matters set out in paragraph (2).

(2) Those matters are—

a) whether it is satisfied that granting the application would cause significant detriment to—

(i) proper planning in respect of the provision of pharmaceutical services in the area of the relevant HWB, **(do not consider that it would)** or

(ii) the arrangements the NHSCB has in place for the provision of pharmaceutical services in that area; **(do not consider that it would)**

(b) whether, notwithstanding that the improvements or better access were not included in the relevant pharmaceutical needs assessment, it is satisfied that, having regard in particular to the desirability of—

(i) there being a reasonable choice with regard to obtaining pharmaceutical services in the area of the relevant HWB (taking into account also the NHSCB's duties under sections 13I and 13P of the 2006 Act(6) (duty as to patient choice and duty as respects variation in provision of health services)). **There is currently reasonable choice with regard to obtaining pharmaceutical services in the area of the Wigan HWB as per Wigan PNA and the comment received from them with regards to this specific application.**

(ii) people who share a protected characteristic having access to services that meet specific needs for pharmaceutical services that, in the area of the relevant HWB, are difficult for them to access (taking into account also the NHSCB's duties under section 13G of the 2006 Act(7) (duty as to reducing inequalities)), or **The applicant has not identified people who share a protected characteristic that are currently experiencing difficulties in accessing pharmaceutical services.**

2.48.1 (iii) there being innovative approaches taken with regard to the delivery of pharmaceutical services (taking into account also the NHSCB's duties under section 13K of the 2006 Act(8) (duty to promote innovation)). **There are no innovative approaches identified within the application**.

granting the application would confer significant benefits on persons in the area of the relevant HWB which were not foreseen when the relevant pharmaceutical needs assessment was published; **The Wigan HWB remains satisfied that at the present time there is sufficient existing pharmaceutical provision in the locality to meet the ongoing needs of patients.**

(c) whether it is satisfied that it would be desirable to consider, at the same time as the applicant's application, applications from other persons offering to secure the improvements or better access that the applicant is offering to secure; **N/A – no other applications received**.

(d) whether it is satisfied that another application offering to secure the improvements or better access has been submitted to it, and it would be desirable to consider, at the same time as the applicant's application, that other application; **N/A – no other applications received**.

(e) whether it is satisfied that an appeal relating to another application offering to secure the improvements or better access is pending, and it would be desirable to await the outcome of that appeal before considering the applicant's application; **N/A – no other applications received, therefore no appeals in process.**

(f) whether the application needs to be deferred or refused by virtue of any provision of Part 5 to 7. **No justification to defer or refuse under these provisions.**

(g) whether it is satisfied that the application presupposes that a gap in pharmaceutical services provision has been or is to be created—

(i) by the removal of chemist premises from a pharmaceutical list as a consequence of the grant of a consolidation application, and

(ii) since the last revision of the relevant HWB's pharmaceutical needs assessment other than by way of a supplementary statement.

2.49 **Satisfied based on discussions with Wigan place-based colleagues, and on the comment from Wigan HWB, that no such gap has been created and therefore no revision to the Wigan PNA has been published yet**.

(3) The NHSCB need only consider whether it is satisfied in accordance with paragraphs (2)(c) to (e) if it has reached at least a preliminary view (although this may change) that it is satisfied in accordance with paragraph (2)(b).

2.50 Applications to which regulation 17 or 18 applies: consequences of additional matters Regulation 19 quoted in full.

2.51 The PSRC conclude d that the application does not satisfy the element s of Regulation 13(1). [sic]

Interested Party representations

2.52 Interested parties notified of the application were as follows:

Well	1 Coldalhurst Lane	Astley, Tyldesley	Manchester	M29 7BS
Allied Pharmacy Astley	391 Manchester Road	Astley, Tyldesley	Manchester	M29 7BY
Manor Pharmacy	12 The Ctr, Richmond Dr	Higher Folds	Leigh	WN7 2ST
Elliott Street Pharmacy	177 Elliott Street	Tyldesley	Manchester	M29 8DR
Davina Pharmacy	155 Elliott Street	Tyldesley	Manchester	M29 8FL
Cohens Chemist	147 – 149 Elliott Street	Tyldesley	Manchester	M29 8FL

2.53 The following organisations were also informed of the application:

2.53.1 Community Pharmacy Greater Manchester (CPGM)

2.53.2 Wigan Local Medical Committee

2.53.3 Wigan Health & Wellbeing Board

2.53.4 Healthwatch Wigan

2.54 Responses were received from CPGM (formerly known as GM LPC), Boots, Stockport Council. The responses are set out below:

Representations received from interested parties from 45-day notification period

2.55 Cohens comment

2.55.1 “We wish to make the following comments:

2.55.2 There are 8 pharmacies within a 1.5 mile radius from the proposed site including multiple shops open on Saturday and Elliott Street pharmacy open extended hours through the week including until 9:30pm weekday evenings, 8am until 9pm Saturdays and 8:30am until 9:30pm Sundays.

2.55.3 The opening hours on the application are very basic at 40 core hours plus 4 hours Saturday morning which can be closed at any time, therefore this application does not offer any better access that [sic] existing pharmacies do.

2.55.4 All services suggested are already being provided by surrounding pharmacies.

2.55.5 There have not been any premises secured as yet.

2.55.6 There have been no complaints from patients in the locality about the levels of service or any issues with access.

2.55.7 Just because there is a new health centre located nearby without a pharmacy within the premises does not mean there is a “need” within the area.

2.55.8 The majority of new residents in the area with the new housing will be younger adults, young families that will have access to a vehicle and be mobile.

2.55.9 The application has failed to identify any areas of significant improvement or innovation within the application. As such the application is refused.

2.55.10 We are sure that NHS England will have regard for these points when considering this application.”

2.56 Davina Chemist comment:

2.56.1 “Re: Application offering unforeseen benefits at Mosley Common, Wigan, M29 by Prescription Hub Ltd

2.56.2 Please accept this letter that PSC (Pharmacy Advice and Consultancy Services Ltd) are authorised to act on our behalf in respect of the above application for inclusion in the pharmaceutical list.

2.56.3 Please ensure that all correspondence is sent to PSC accordingly.

2.56.4 Should you need any further clarification on this matter do not hesitate to contact me.”

2.57 Wigan HWB comment:

2.57.1 “RE: CAS-349206-C6R7W9 - Application offering unforeseen benefits at Mosley Common, Wigan, M29 by Prescription Hub Ltd

2.57.2 We are writing to make a written representation on behalf of Wigan Health and Wellbeing Board and NHS Greater Manchester (Wigan), regarding the application offering unforeseen benefits at Mosley Common, Wigan, M29 by Prescription Hub Ltd.

2.57.3 We note that a best estimate of the proposed site for new pharmacy is provided, as premises located on/near Parr Bridge Retail Park, M29 8RZ have not yet been secured. We also note that for NHS Greater Manchester to decide whether to approve the application, Prescription Hub Ltd needs to prove that a new pharmacy would provide “significant benefits in terms of providing better access to and choice of pharmaceutical services”.

2.57.4 The panel may wish to consider the following information in relation to the unforeseen benefits application.

2.57.5 Feedback is provided based on the current 2022 Wigan Borough Pharmaceutical Needs Assessment (PNA). The 2022 PNA is currently under review for publication later in the year and will consider any changes to housing development which may impact on the need for additional access to or choice of pharmaceutical services.

2.57.6 The existing Wigan Borough PNA considered the population demographics, housing projections and the distribution of pharmacies across the Borough and it was considered that the current pharmaceutical service providers would be sufficient to meet local needs over the lifetime of the PNA.

2.57.7 The PNA also considered the provision of pharmaceutical services across the Borough and outside of the health and wellbeing board area which secure improvements or better access to other pharmaceutical services, specifically in relation to the demography and health needs of the population. It identified that current provision of pharmaceutical services offered by both community pharmacies and other health care providers met the needs of the population of Wigan Borough. The PNA did not identify any services which were not provided in the health and wellbeing board area that would secure improvements or better access to pharmaceutical services.

2.57.8 The applicant states that pharmaceutical provision is lacking in the area of Mosley Common and that granting the application would secure better access to pharmaceutical services. We are not aware of any feedback regarding concerns about the current access to pharmacy services within the existing service delivery footprint (SDF) described in the PNA.

2.57.9 The PNA describes pharmacy services as being well distributed throughout the SDF around the main areas of population with 2 pharmacies just over the border in a neighbouring health and wellbeing board area. Pharmacies in the SDF have parking either on site or nearby and are accessible by public transport. Delivery services are provided to support those people less able to travel to the pharmacy. Existing pharmacies provide a wide range of advanced, enhanced and locally commissioned services. If it is assumed that most people would likely travel to Parr Bridge retail park by car or public transport, it could be assumed that they would also be able to travel to a pharmacy if required.

2.57.10 The applicant has proposed core and supplementary opening hours between 9am and 6pm Monday to Friday and between 9am and 1pm on a Saturday. The pharmacy would be closed all day Sunday. Currently, access to pharmacy services within the SDF is available 7 days a week from early in the morning to late at night due to there being provision from a pharmacy with extended contractual hours (‘100 hour’ pharmacy). In the event that the application is successful, we would request that opening hours should include service provision on Saturdays and Sundays to ensure residents visiting the retail park would have access to pharmacy services 7 days a week.

2.57.11 Should you require any further information on this representation, please contact the Wigan Locality Medicines Optimisation Department".

2.58 CPGM comment:

2.58.1 "Community Pharmacy Greater Manchester (CPGM) applications subgroup has reviewed this application and would like to reference and mirror our response sent to similar application that has been rejected in 2021 (please see attached).

2.58.2 The CPGM subgroup would also like to note that no supplementary statements have identified any gaps in the provision since the referred to attached response sent back in 2021.

2.58.3 CPGM applications subgroup would like to receive any further correspondence regarding this application and wish to be kept informed of its progress".

2.59 That is the response sent back in 2021:

2.59.1 "Re: Application offering unforeseen benefits at Parr Bridge Retail Park, Mosley Common Road, Parr Bridge Village, Wigan, M29 8PR by PCT Healthcare Ltd

2.59.2 Thank you for your letter dated 22nd October 2021 informing us of the above application and inviting us to make representations. Greater Manchester LPC applications subgroup has reviewed this application.

2.59.3 Having studied the Wigan Pharmaceutical Needs Assessment (PNA), 2018, we would agree that there is no mention of the additional housing in the vicinity of the application. We would also note that pharmacy provision is slightly above the national average per head of population at the time of the PNA and so the building of approximately 220 new houses is unlikely to affect this provision, as the increase in population is likely to be less than 0.3% against a figure of over 300,000 at the time of the PNA. The PNA also discusses the number of pharmacies providing both prescription collection and delivery, the wide range of opening hours and the services provided, including from distance selling pharmacies. The PNA does not identify any area lacking in provision.

2.59.4 The applicant discusses the need for increased access to a pharmacy for the residents around Parr Bridge as many do not have access to a car. They do not explain how this has changed since the production of the PNA and so we are unclear that this can be identified as an unforeseen benefit.

2.59.5 The PNA uses Service Delivery Footprint (SDF) as a way of considering adequacy of provision and looking at the SDF for Tyldesley and Atherton, current service provision seems to be of good quantity, variety and quality and provided from within the CCG footprint and over the border in the current footprint.

2.59.6 The applicant seems to be basing the application of the location of a new GP practice, they have not, in our opinion, provided evidence that this would produce significant unforeseen benefits to the population.

2.59.7 Greater Manchester LPC would like to receive any further correspondence regarding this application and wish to be kept informed of its progress".

2.60 Representations received from circulation of first representations

2.61 Applicant's response:

Greater Manchester LPC

2.61.1 We would like the Committee to note that the LPC represent the interests of current pharmaceutical contractors. The LPC are inherently obliged to contest unforeseen benefits applications, in order to fulfil their responsibilities to current contractors. Objection by the LPC is obligatory and thus comments should be read in such context.

2.61.2 In their response, the LPC mentioned the construction of 220 new homes. Such a statement clearly does not align with our client's application, which details a significantly higher number of projected housing. Thus, we submit that the expected population growth will likely increase pressure on the existing pharmaceutical provision in Mosely Common.

2.61.3 We also submit that having a pharmacy co-located with the new GP practice will provide many benefits unforeseen by the PNA. Co-locating a pharmacy with a GP surgery creates a one-stop hub where patients can see their GP and collect prescriptions in the same visit which is particularly valuable for those with mobility issues or long-term conditions. This setup fosters real-time clinical collaboration between GPs and pharmacists, improving care quality. It supports the NHS's goal of delivering integrated, community-based care, optimises NHS resource use, improves access to urgent pharmaceutical support, and reduces patient travel.

2.61.4 Cohens Pharmacy stated that there are eight pharmacies within 1.5 miles of the proposed site. We disagree with this assertion as, while this may be the case as the crow flies, we note that this is not the case in reality.

2.61.5 If we use the most practicable journeys patients would take to the nearest pharmacies, then only four of the eight are in fact located within 1.5 miles of the proposed site. Notably, no pharmacy is located within a mile of the proposed site when looking at practicable routes.

2.61.6 Cohens also note that there have been no complaints from patients in the locality but upon further research we have discovered multiple negative reviews of pharmacies within the 1.5-mile radius mentioned by the respondent.

2.61.7 We have provided these below:

2.61.8 Further, Cohens' assertation that new residents in the area will be younger with access to a vehicle is speculative.

2.61.9 Davina Pharmacy state that our client's application does not explain the figure of 18,000, but as mentioned the nearby villages of Boothstown, Ellenbrook, and Astley are not served by any major supermarkets and the Lidl at the proposed site will likely be well utilised by residents from these villages. We submit it is not unreasonable to conclude that a large portion of residents from these villages would combine accessing pharmaceutical provision with their daily shopping routines and therefore it is plausible that close to 18,000 people would opt to access a pharmacy at our clients proposed location.

2.61.10 Proposed location - Parr Bridge Retail Park

2.61.11 Parr Bridge is uniquely accessible due to its central location, wide footpaths, and direct access to nearby residential areas. Combining pharmaceutical provision with existing GP practices is beneficial as it reduces the number of trips patients accessing health services have to make to collect prescriptions. This could be a significant consideration for those with mobility issues or the elderly and aligns with NHS strategies to shift care closer to home.

2.61.12 The respondent suggests that surrounding areas provide better amenities, however Astley has very few amenities. Walkden and Tyldesley may serve wider areas but are beyond reasonable walking distance for residents of Mosley Common. The population around the proposed site is growing and no longer "sparse". As evidenced above, many new homes are located within walking distance of the proposed location, and as such, this location represents a natural centre for pharmaceutical provision in the area.

2.61.13 Journey on Foot to alternative pharmacies

2.61.14 As mentioned in our client's application, we cannot consider a 2-mile round walk to access pharmaceutical services as sufficient. When we consider that distance in itself is a barrier to access, such onerous journeys are not representative of having reasonable choice.

2.61.15 This is particularly true for elderly patients, those with disabilities, or people with young children. It is not just about distance; choice, safety, and time are also major considerations.

2.62 LPC comment, 20th April 2025

2.62.1 "Re: Application offering unforeseen benefits at Mosley Common, Wigan, M29 by Prescription Hub Ltd

2.62.2 Thank you for your letter dated 8th April 2025, informing us of the above application and inviting us to make representations.

2.62.3 Community Pharmacy Greater Manchester would like to acknowledge the received responses and wishes to receive any further

correspondence regarding this application and to be kept informed of its progress."

2.63 The PSRC had regard to interested party representations and the applicant's response to those representations when considering the application.

2.64 If the application is in a controlled locality or the premises are within 1.6km of a controlled locality then gradualisation for doctors may need to be considered. Numbers of dispensing patients who may be affected should be included, along with information on what percentage of a practice's dispensing patient list this equates to.

2.64.1 N/A – proposed best estimate is not within a controlled locality nor within 1.6km of one.

Additional considerations

2.65 The PSRC also considered the impact of decision on those with protected characteristics under the Equalities Act 2010, in accordance with NHS England's Public Sector Equality Duty and the ICB's commitment to reducing health inequalities.

2.66 It was noted that from 1st January 2021 for all face-to-face community pharmacies and 1st April 2021 for all distance selling premises, the system of clinical governance within the Terms of Service was expanded to include the promotion of healthy living. The Healthy Living Pharmacy (HLP) framework is aimed at achieving consistent provision of a broad range of health promotion interventions through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities. NHS Greater Manchester is committed to support its community pharmacies in achieving and maintaining compliance with this framework.

2.67 Impact considered

Decision

2.68 Based on all available information, the PSRC concluded that the application did not offer unforeseen benefits, and therefore does not meet the requirements of Regulation 18(2)(b) for the reasons stated in this decision report.

2.69 The PSRC was satisfied that patients still have the benefit of a choice of pharmaceutical service provider, good geographical spread of pharmacy premises, services and opening hours within a mile of the proposed location.

2.70 The application offers no additional benefits in terms of services and opening hours to what is already provided by existing contractors, nor any innovation in terms of service provision.

2.71 There is no indication that existing providers are unable to meet any additional service demand, nor is there any indication that service users (including those with protected characteristics) are experiencing difficulties in accessing pharmaceutical services.

2.72 The application is therefore refused.

2.73 The applicant is awarded appeal rights.

2.74 The Pharmaceutical Services Regulations Committee (PSRC) makes decisions on applications made under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, as amended.

2.75 Although the above decision does not constitute a contractual change at this stage, should the PSRC's decision be appealed by the applicant and the appeal upheld, this would potentially lead to a contractual change at a future date. Under NHS Greater Manchester governance this determination by the PSRC is to be authorised for and on behalf of Greater Manchester Integrated Care by: [KS], Chief Commissioning Officer."

3 The Appeal

In a letter dated 4 July 2025 addressed to NHS Resolution, Healthcare Plus Consulting Ltd on behalf of the Applicant appealed against the Commissioner's decision. The grounds of appeal are:

3.1 "Thank you for your letter dated 13th June 2025. Prescription Hub Ltd have instructed us (Healthcare Plus Consulting Ltd) to act on their behalf for this appeal, please find an authorisation letter attached.

3.2 We would like to appeal the decision made in relation to the above unforeseen benefits application.

3.3 We submit that NHS England have failed to properly evaluate Regulation 18 and the fundamental question within the Regulation: does the application provide 'improvements or better access to pharmaceutical services, or pharmaceutical services of a specified type in the HWB's area.' In their decision, the Greater Manchester ICB refused our client's application, and we believe they misdirected themselves in doing so.

3.4 We assert that this application does provide improvements or better access to pharmaceutical provision, as set out in our client's original application and the comments previously provided by our client. We have re-attached these submissions for re-consideration by NHS Appeals [sic].

3.5 We submit that the Greater Manchester ICB did not give due consideration to the following points outlined by our client:

3.5.1 Current service provision and population density

3.5.2 Deprivation

3.5.3 Local Population Demographics

3.5.4 The Mosley Common Community

3.5.5 Housing developments

3.5.6 The draft 2025 PNA

3.6 In this appeal, we address each of these points below.

Current Service Provision

3.7 We submit that the ICB have misjudged our client's proposed location and proximity to the existing pharmacies. We highlight that they have used the postcode M29 instead of the full postcode utilised for our client's proposed site (M29 8RZ), which has been used as an arbitrary marker. Whilst we agree that not all residents will start their journey here, it is impractical to assess patient journeys from every single household. Some patients will have journeys that are longer, and some shorter than detailed in our client's original application. However, the proposed site represents a sensible place to evaluate these journeys. Thus, they have incorrectly concluded that the nearest pharmacy is 0.3 miles away (Well Pharmacy, M29 7BS), when it is in fact 1.5 miles away as per Google Maps. We reiterate that the closest pharmacy is Peak Pharmacy (M28 1PB), which is 1.1 miles away. We would also like to note that Peak Pharmacy, who operate the two closest pharmacies to the proposed site, have chosen not to provide representation. This is likely due to the previous application submitted by Peak Pharmacy, which illustrates that they understand there is a need for a pharmacy in Mosley Common. Clearly, if the local pharmacy operator is attempting to open up a pharmacy then there is without doubt a need for a pharmacy.

3.8 In their decision report, we respectfully disagree with the Greater Manchester ICB's statement that the existing pharmaceutical provision is sufficient in the locality. We submit that the two maps below taken from the Wigan PNA negate this statement.

3.9 Figure 1 [provided to Committee in Appendix C] displays pharmacies in the Wigan Borough each with a 1-kilometre radius circled around them. When we look at the Mosley Common area (which we have circled in red on the map), we can see that the majority of this community are not within a 1-kilometre radius of an existing Pharmacy.

3.10 By the PNA's very own criteria, we submit that this clearly indicates a geographical gap in pharmaceutical provision for Mosely Common.

3.11 The Wigan PNA repeatedly uses the distance of 1km from a pharmacy when assessing whether provision is accessible; stating that "pharmacies are well distributed geographically, covering the main areas of population, with most of the population living within 1km of a pharmacy" (Wigan PNA 2022, pg.55). It is our understanding that the PNA is a legally binding document and therefore a given distance of 1-kilometre should be taken as the appropriate parameter for determining accessibility to pharmaceutical provision. We highlight that it is not for anybody to question the reasonableness of the PNA, but rather for decisions to be made that align with the PNA.

3.12 Despite this criteria, we note that the densely populated locality of Mosley Common is not served by a pharmacy. Using our proposed site as an arbitrary marker, the nearest pharmacy is 1.77km away, which is significantly in excess of the 1km distance as stipulated in the Wigan PNA. Thus, it is clear that there is insufficient access and choice to pharmaceutical provision for residents of Mosley Common.

3.13 As mentioned above, we also note that Mosley Common is a high-density populated area. Figure 2 [provided to Committee in Appendix C] above shows

the population density at Lower-layer Super Output Area (LSOA) level within the Wigan Borough; with darker shades of red indicating more densely populated areas. Again, the red circle represents the area in and around Mosley Common. According to the map, the population density of this area is comparable to the highest in Wigan. This is further evidenced by 2021 Census Data, which shows that the Wigan 029D LSOA has 2,508.3 residents per square kilometre, which is significantly more than the local authority average of 1,750 residents per square kilometre, and almost 6 times the England average of 433.5 residents per square kilometre. We submit that it is inconceivable that an area with such a high population density has no pharmaceutical provision, especially considering the high deprivation in the area.

3.14 The Committee will be aware that Boothstown Medical Centre is also located in the heart of Mosley Common. We note that the PNA sets a barometer for the distance between GP services and pharmaceutical provision, stating that "98% of general practices (including branch surgeries) have a pharmacy within 1km…." (Wigan PNA 2022, pg.56). When we consider that the distance between Boothstown Medical Centre and the nearest pharmacy is 1.77km, significantly over the 1km parameter that only 2% of GP's fall under, and accounting for the population density in the area; it is clear that patients of Boothstown Medical Centre do not have reasonable access and choice to pharmaceutical provision.

3.15 It does not appear reasonable that one of the most densely populated areas in the Borough, with high levels of deprivation and groups with protected characteristics, is within the 2% of areas that do not have a pharmacy located within 1km of a GP. Especially when we consider that many of those living in rural and affluent areas will be in the 98% and have better access to a pharmacy than the densely populated urban area of Mosley Common. With c.8000 residents on the Boothstown Medical Centre's patient list, a pharmacy at the proposed location would greatly improve better access and provide reasonable choice, allowing residents to visit Boothstown Medical Centre in connection with the pharmacy, instead of being forced to make onerous one-off journeys.

Housing Developments & 2025 Draft PNA

3.16 The 1-km criteria that was used throughout the 2022 Wigan PNA is also used in the 2025 Wigan Draft PNA, with the lack of pharmaceutical provision in Mosley Common being recognised in the draft PNA through the declaration of a future need. In the section titled "Future needs, improvements and securing better access" the Draft PNA stated the following:

"The PNA concludes that Mosley Common is likely to require additional pharmacy provision in the future due to planned housing developments in the area. The anticipated growth builds upon the residential expansion that has already occurred during the previous PNA period. The cumulative impact of past and future housing developments is likely to increase demand for pharmaceutical services in the locality "(Wigan PNA Draft 2025, pg.11).

3.17 This clearly demonstrates the scale of the nearby developments, with the Draft PNA acknowledging that pharmaceutical provision in the locality is not sufficient to cope with the increasing demand. We submit that current residents' access

to a pharmacy is insufficient before even considering future development. Notably, the 2022 PNA did not account for the full scale of developments that have already taken place and therefore the population of Mosley common is underserved. The 2025 Draft PNA explicitly states that Mosley Common had "*considerable development which exceeded the expectation during the period covered by the previous PNA"* (Wigan PNA Draft 2025, pg.49), hence reiterating that the benefit brought about by our client's application was unforeseen.

3.18 The 2022 Wigan PNA listed the developments with the most dwellings expected to occur across the period of the PNA, listing a total of 365 houses across the Tyldesley/Mosley Common locality. The number of dwellings currently completed or in progress is 914 as detailed below, significantly more than predicted. This endorses the Draft PNA's statement that the current developments have exceeded expectation, we submit that a pharmacy at the proposed site would provide better access for all current residents, as well as meeting the future demand anticipated in the locality.

3.19 Recent developments completed have provided the area with 250 houses spread across Garret Manor (48 houses); Finch Park (103 houses); and Trilogy (99 houses). Assuming an occupancy rate of 2.5 per household, we submit that this has already increased the reliant population to an additional 625 residents above and beyond 2021 census data provided.

3.20 The local population will see further expansion from the new developments currently underway:

3.20.1 Kellen Homes (150 homes)

3.20.2 Garret Fields (42 homes)

3.20.3 Twire (228 homes)

3.20.4 Bridgewater View (244 homes)

3.21 The Kellen Homes development will see the construction of 119 social rent units and 31 shared ownerships, while the rest of the developments promise to offer 25% of their units as affordable housing. According to the 2021 census data 25.5% of residents within the 029D LSOA live in socially rented accommodation, significantly higher than the 17.1% national average. With the number of social rent units currently underway this figure is likely to increase, illustrating further the levels of deprivation in the locality. With higher levels of deprivation being linked to poorer health outcomes, we reiterate the need for better access to pharmaceutical services.

3.22 We note there is also a further 672 proposed homes to be built as part of the Master Plan, which will begin in future phases. With the localised population currently residing to the south and west of the proposed site, the Master Plan development will bring new residents to the north and east, thus significantly increasing the number of residents likely to utilise a pharmacy at the proposed site.

3.23 Altogether, this equates to approximately 1,586 houses, included those recently built, which will drastically increase the population of already densely

populated Mosley Common area. Assuming an occupancy rate of 2.5 per household, Mosley Common will see an influx of approximately 3,965 residents which will increase the reliant population to 9,580 residents who will need an accessible pharmacy. These residents would be utilising the amenities at Parr Bridge retail park as part of their daily lives and a pharmacy adjacent to the Boothstown Medical Centre would provide better access to their health needs. We can therefore reasonably assume that the number of people attending the Parr Bridge retail park will be significantly more than the 9,580 residents – a figure expected to continue growing.

Deprivation

3.24 The Greater Manchester ICB acknowledged that Mosley Common itself is a deprived area. More specifically, according to the 2019 Index of Multiple Deprivation, the LSOA of the proposed site (Wigan 029D LSOA) falls within the top 20% most deprived areas nationally. We do not understand why the ICB, after recognising that the area itself is deprived, failed to consider the implications of such deprivation.

3.25 It is well documented that high levels of deprivation are linked with poorer health outcomes. We highlight from the 2021 census data that 5.6% of residents living in the Wigan 029D LSOA have bad/very bad health, which is higher than the national average of 5.2%. Thus, residents living at/near the proposed site clearly have bad/very bad health and are more likely to be reliant on pharmaceutical services.

3.26 We assert that pharmaceutical provision should be doubly concentrated in deprived areas, yet, with the nearest pharmacy being over 1.77 kilometres away, we submit that this does not represent reasonable choice or sufficient access to pharmaceutical services – even by the Wigan's Health & Wellbeing Board's own 1-kilometre criteria. Given the level of deprivation, it would be reasonable to conclude that travelling by car or public transport is not a likely option for residents due to petrol costs and bus fares presenting a barrier to access. The most relevant bus is the Bee Network, which has a single fare of £2 and a day ticket of £5 for adults, which can be a barrier to access for many especially when we consider that a significant proportion of residents are living within socially rented accommodation. With the 2.2-mile round trip to the nearest pharmacy being of unreasonable distance to undertake on foot, we submit that residents in the locality do not have reasonable choice.

Mosley Common

3.27 We reiterate that Mosley common is a self-sustaining community where residents can access all amenities needed within their daily lives, many of which are situated at the Parr Bridge Retail Park within the best estimate of the proposed site, M29 8RZ:

3.27.1 Lidl Supermarket

3.27.2 Boothstown Medical Centre

3.27.3 Partou Best Friends Day Nursery & Pre School

3.27.4 Harrison Family Vets

3.27.5 ExtraCare Charity Shop

3.27.6 Starbucks

3.27.7 Greggs

3.27.8 Subway

3.27.9 Pod charging station

3.27.10 Snap Fitness

3.27.11 Sunseekers Tanning Centre

3.28 As well as the amenities in Parr Bridge Retail Park, Mosley Common also has:

3.28.1 St Johns Church

3.28.2 Lindale Hall Community Centre

3.28.3 Mosley Common Playing Fields

3.28.4 St John's Mosley Common C or E Junior & Infant School

3.28.5 Holy Family Catholic Primary School Boothstown

3.28.6 Spar Convenience Store

3.28.7 InPost Shop

3.28.8 Ashley's Hair Lounge

3.29 Yet, when accessing their local pharmacy, residents are forced to undertake separate one-off journeys, this is felt especially by those groups who share protected characteristics, and likely users of Boothstown Medical Centre. It is notable that the patient list at Boothstown Medical Centre has been constantly growing with 6,058 patients in 2021 and 7,936 as of October 2024; a growth of over 30% in 3 years. The current list of 7,936 patients is higher than the population of the immediate LSOA's, demonstrating that some of those living slightly further out and in the surrounding villages also access the Boothstown Medical Centre and likely the other nearby amenities. It is reasonable assume [sic] that these patients would also utilise a pharmacy at the proposed site during these visits.

3.30 Those in need of emergency prescriptions would also significantly benefit from a Pharmacy at the proposed site – currently patients of Boothstown Medical Centre have to travel 1.1 miles to obtain emergency medication. This is clearly not representative of reasonable choice or access, especially when we consider that those in need of emergency medication may not be able to travel far.

3.31 With the advent of Pharmacy First, we submit that it is important to have pharmacies located within communities. Residents are more likely to access minor ailments services and advice in connection with other amenities as part

of their daily lives, leading to better health outcomes and reducing pressures on Boothstown Medical Centre. This holds especially true for those residents who live near the proposed site who, as demonstrated above, have greater health needs. Excessive distances or costs can deter people from accessing these services and ultimately will place more strain on the primary care network as conditions worsen. For Pharmacy First to be effective, pharmacies must be accessible within communities!

3.32 We note that reference has previously been made to the guided busway to the North as useful for patients in accessing pharmacy provision, however, there is a steep hill in accessing this busway which will not be traversable for many. Residents must walk along the A577 to the Busway, however, the incline on this road has a gradient of 1 in 12 for c.150 metres, with points as steep as 1 in 10. For context, guidance states that a disabled access ramp should have a gradient of no more than 1 in 20 for a maximum ramp length of 10 metres. Given this hill is significantly longer than such a ramp, and the gradient at its steepest point is double the mandated figure, it is a clear barrier to access for those in a wheelchair/mobility scooter/or of impaired mobility. this journey is clearly not representative of reasonable choice and presents a clear barrier to access.

Conclusion

3.33 We submit that the current distance of 1.1 miles to the nearest pharmacy is not representative of reasonable choice, thus rendering pharmaceutical access as insufficient.

3.34 We note that the locality surrounding the proposed site is deprived and residents have greater health needs. This is especially pertinent when we consider the rapidly growing; aging population; and high levels of residents disabled under the Equality Act 2010, for whom having access to a nearby pharmacy that they can visit as part of their daily lives is necessary.

3.35 We also note that the area is densely populated and with various developments underway the demand for a local pharmacy will only increase. Having such a large population without sufficient access to pharmaceutical services is not representative of reasonable choice or even adequate access to pharmaceutical provision.

3.36 The 2025 Draft PNA is cognizant of the need for a pharmacy in Mosley Common, and we maintain that granting this application would secure better access and improvements to pharmaceutical services for local residents. We submit that regulation 18 has been met and we invite NHS Resolution to grant our client's application."

3.37 [With the letter of appeal, Healthcare Plus Consulting Ltd on behalf of the Applicant included further information:

- Supporting information (as set out in Section 1 above);
- Letter to PCSE dated 22 April 20205 (see 3.38 below);
- Wigan Borough Draft 2025 PNA;
- Wigan Borough 2022 PNA; and

- Wigan Borough “Making the most of your local pharmacy” ‘Pharmacy Patient Satisfaction Survey report March – April 2022’]

In a letter to PCSE dated 22 April 2025, Healthcare Plus Consulting Ltd on behalf of the Applicant stated:

3.38 “Thank you for your letter dated 8th April 2025. We would like to take this opportunity to respond on behalf of our client to comments made by interested parties in the area.

Greater Manchester LPC

3.39 We would like the Committee to note that the LPC represent the interests of current pharmaceutical contractors. The LPC are inherently obliged to contest unforeseen benefits applications, in order to fulfil their responsibilities to current contractors. Objection by the LPC is obligatory and thus comments should be read in such context.

3.40 In their response, the LPC mentioned the construction of 220 new homes. Such a statement clearly does not align with our client’s application, which details a significantly higher number of projected housing. Thus, we submit that the expected population growth will likely increase pressure on the existing pharmaceutical provision in Mosely Common.

3.41 We also submit that having a pharmacy co-located with the new GP practice will provide many benefits unforeseen by the PNA. Co-locating a pharmacy with a GP surgery creates a one-stop hub where patients can see their GP and collect prescriptions in the same visit which is particularly valuable for those with mobility issues or long-term conditions. This setup fosters real-time clinical collaboration between GPs and pharmacists, improving care quality. It supports the NHS’s goal of delivering integrated, community-based care, optimises NHS resource use, improves access to urgent pharmaceutical support, and reduces patient travel.

Cohens

3.42 Cohens Pharmacy stated that there are eight pharmacies within 1.5 miles of the proposed site. We disagree with this assertion as, while this may be the case as the crow flies, we note that this is not the case in reality.

3.43 If we use the most practicable journeys patients would take to the nearest pharmacies then only four of the eight are in fact located within 1.5 miles of the proposed site. Notably, no pharmacy is located within a mile of the proposed site when looking at practicable routes.

3.44 Cohens also note that there have been no complaints from patients in the locality but upon further research we have discovered multiple negative reviews of pharmacies within the 1.5 mile radius mentioned by the respondence.

3.45 We have provided these below: [provided to Committee at Appendix D]

3.46 Further Cohen’s assertion that new residents in the area will be younger with access to a vehicle is speculative.

Davina Pharmacy

3.47 Demographics

3.48 While it is true that housing developments may affect the socio-economic profile of the area, without a newer Index of Multiple Deprivation (IMD), it is speculative to suggest that deprivation has improved. New housing developments do not automatically equate to affluence or better health as many units are built under mixed schemes, including shared ownership and affordable housing. The developments being built offer a variety of house styles which are just as likely to be occupied by elderly residents or those with protected characteristics.

3.49 With regard to deprivation, the Wigan 029D LSOA being within the top 20% most deprived areas in the country is evidenced by the 2019 IMD. The IMD 2019 is measured by seven considerations – none of which are car ownership statistics. Thus, we submit it is overly simplistic to conflate car ownership with affluence. More importantly, car ownership does not always equate to an ability to drive as some residents may not be comfortable driving in poor weather conditions. Fair car ownership statistics do not reduce the need for walkable local pharmaceutical provision, which has been identified as encouraging positive health outcomes. Notably the Wigan 029D LSOA has a higher average of residents with bad/very bad health (5.6%) when compared with the national average. It is well documented that the most deprived areas of the country are in greater need of pharmaceutical provision.

3.50 Whilst we accept that the Wigan 029C and Wigan 025E are not as deprived, the Wigan 029C LSOA has a higher population (23.3%) of residents over the age of 65 than the national and local authority averages of 18.3% and 19.3% respectively. It is well documented that the elderly have higher health needs. Additionally, the Wigan 025E LSOA has a higher population of residents with mobility issues than the national average and a much higher population of residents over the age of 65 at 30.2%.

3.51 These statistics indicate a high reliant population with protected characteristics living in close proximity to the proposed site.

3.52 Population figures

3.53 The respondent has mentioned that the referenced LSOAs include significant areas on the opposite side of the busway, but as shown by their own maps, much of this area was greenspace with few residential dwellings. We submit the majority of housing, and thus the majority of the reliant population live to the south of the busway. Much of the growing population is due to the existence of the new housing developments listed below:

Bellway Homes: c. 150 homes

3.54 Located directly behind Parr Bridge Retail Park. The development is complete per google satellite images.

Redrow's Bridgewater View: c. 440 homes

3.55 Located off Mosley Common Road is approximately 0.2 miles from Parr Bridge Retail Park.

3.56 The development is complete per google satellite images.

3.57 Eccleston Homes' Garrett Manor: c. 340 homes

3.58 Located on Norton Road, approximately 0.3 miles away from Parr Bridge retail park. The development is complete per google satellite images.

3.59 These developments do not include the c.1000 additional family homes to be built in Moseley Common.

3.60 Davina Pharmacy state that our client's application does not explain the figure of 18,000, but as mentioned the nearby villages of Boothstown, Ellenbrook, and Astley are not served by any major supermarkets and the Lidl at the proposed site will likely be well utilised by residents from these villages. We submit it is not unreasonable to conclude that a large portion of residents from these villages would combine accessing pharmaceutical provision with their daily shopping routines and therefore it is plausible that close to 18,000 people would opt to access a pharmacy at our clients proposed location.

Proposed location - Parr Bridge Retail Park

3.61 Parr Bridge is uniquely accessible due to its central location, wide footpaths, and direct access to nearby residential areas. Combining pharmaceutical provision with existing GP practices is beneficial as it reduces the number of trips patients accessing health services have to make to collect prescriptions. This could be a significant consideration for those with mobility issues or the elderly and aligns with NHS strategies to shift care closer to home.

3.62 The respondent suggests that surrounding areas provide better amenities, however Astley has very few amenities. Walkden and Tyldesley may serve wider areas but are beyond reasonable walking distance for residents of Mosley Common. The population around the proposed site is growing and no longer "sparse". As evidenced above, many new homes are located within walking distance of the proposed location, and as such, this location represents a natural centre for pharmaceutical provision in the area.

Journey on Foot to alternative pharmacies

3.63 As mentioned in our client's application, we cannot consider a 2-mile round walk to access pharmaceutical services as sufficient. When we consider that distance in itself is a barrier to access, such onerous journeys are not representative of having reasonable choice.

3.64 This is particularly true for elderly patients, those with disabilities, or people with young children. It is not just about distance; choice, safety, and time are also major considerations. The journey includes busy junctions, and is not always feasible, especially in inclement weather or for those managing acute conditions. Having closer and more walkable pharmaceutical provision would mitigate many of these issues. We note that the Wigan 029C and 025E LSOAs have a higher population of elderly patients when compared to the national average of 18.3%, at 23.3% and 30.2%, respectively.

3.65 Additionally, the Wigan 025E LSOA has a higher population of residents with mobility issues than the national average.

3.66 The assertion that the guided busway and A580 East Lancashire Road do not present meaningful barriers overlooks real-world conditions. While crossings exist, they do not fully mitigate the deterrent these features pose to pedestrian movement, particularly for the elderly, disabled, or parents with young children. These roads and the guided busway may function as psychological barrier for many residents.

Journey by Car to alternative pharmacies

3.67 Our traffic estimates [sic] for the journey to Tims & Parker Pharmacy were based on peak-hour conditions using Google Maps. Delays due to school runs, congestion, and poor weather could vary considerably. Moreover, not all residents who own vehicles will be comfortable driving in adverse weather conditions. See map with car travel times below.

3.68 Map of the car journey taken from Google Maps [provided to Committee at Appendix D]

3.69 Another point not considered by the respondent when it comes to the journey by car is fuel poverty, which would be a significant consideration for residents living within the Wigan 029D LSOA, which is one of the top 20% most deprived areas in the country. The cost of fuel may be a significant barrier for patients living in deprived areas.

Journey by Bus to alternative pharmacies

3.70 While the proposed site is a best-estimate area, it is located at a clearly defined retail park. The journey analysis is a proxy for what many residents face when trying to access pharmaceutical services from that area. As mentioned previously, there are multiple new housing developments near to the Parr Bridge retail park and therefore we submit many residents now live near the proposed site. As with fuel prices, residents may find affording bus fare to be a barrier to access, especially those living within the most deprived areas mentioned above. These barriers would be mitigated by having a walkable pharmacy available.

Conclusion

3.71 In conclusion, granting this application would secure better access and improvements to pharmaceutical services for residents of Mosley Common and surrounding areas, especially when we consider the high elderly population and those with protected characteristics. Additional consideration of deprived areas is warranted, especially in regard to patient journeys and choice of pharmaceutical provision.

3.72 We submit that granting this application would provide reasonable choice and improved access for residents of Mosley Common, and submit that Regulation 18 has been met.

3.73 We invite the committee to grant this application."

4 Summary of Representations

This is a summary of representations received on the appeal.

4.1 Pharmacy Sales and Consultancy on behalf of Davina Pharmacy

4.1.1 "We act for Davina Pharmacy Limited and have enclosed a letter of authorisation confirming our instructions in this matter.

4.1.2 We have been passed a copy of your letter dated 23rd July 2025 informing our client of the above appeal. Our client has instructed us to respond on its behalf.

Background

4.1.3 On behalf of our client, PSC submitted an objection to the original application by this applicant to NHS England. In order to limit the risk of repetition we have included a copy of that response and we ask that the Primary Care Appeals Committee ("The Committee"), takes those comments into account when considering this appeal.

4.1.4 Responses to this application were also submitted by several other parties, and the applicant responded to these in a letter dated 22nd April 2022 [sic].

4.1.5 As our client had not seen these comments prior to receiving this appeal, we wish to begin by taking the opportunity to make a response to those comments. We respond using the same headings as the applicant in that letter, which is shown in pages 17 to 22 of the appeal document.

Greater Manchester LPC

4.1.6 The statement made by the applicant that "the LPC are inherently obliged to contest unforeseen benefits applications" and "objection by the LPC is obligatory", is manifestly incorrect. The LPC is under no such obligation. Whilst it is correct to say that their role is to represent existing pharmacy contractors, it is also their role to provide information in respect of Market Entry applications that will assist NHS England to make their decision. I imagine the LPC will take significant issue with the suggestion that they are unable to respond objectively.

4.1.7 In respect of the housing developments, we discuss these further below.

4.1.8 The suggestion that the co-location of a pharmacy with a GP practice specifically provides benefits that have been unforeseen in the PNA misinterprets both the regulations and the contents of the PNA. The regulatory tests make no mention of proximity to GP surgeries and the PNA makes no mention of specific benefits associated with co-locating pharmacies and medical centres.

4.1.9 The appellant has, at various points in its application and its appeal, referred to this medical centre and the number of patients registered

with it, but has not provided any data in respect of how many patients actually attend the surgery. The vast majority of prescription items dispensed by pharmacies are for repeat medication that do not require a visit to the medical centre.

4.1.10 It is also the case that GP surgeries increasingly provide patients with the opportunity to have remote consultations, avoiding the need to travel to the medical centre. The image below is taken from the Boothstown Medical Centre Website (https://www.boothstownmedicalcentre.co.uk/services/appointments/)

4.1.11 Without any information in respect of how many people are actually attending this medical centre the committee will find it difficult to form a view on the extent to which this informs the need for additional pharmaceutical services to be provided.

Cohens Pharmacy

4.1.12 The distances to existing pharmacies have been discussed at length within the application. However, the appellant's own comments confirm that there are four pharmacies within a 1.5 mile journey of its proposed location. This constitutes evidence that patients have choice within a reasonable distance.

4.1.13 The appellant goes on to discuss “multiple negative reviews” but provides only four screenshots of reviews which relate to a period of approximately 6 months. It is noteworthy that the average rating of Peak Pharmacy at Ellenbrook is 3.8 out of 5.

4.1.14 Whilst the rating of Peak Pharmacy at Little Hulton is lower (2.9 out of 5 at the time of writing), there are recent positive reviews as shown below [see Appendix D for Committee].

4.1.15 Inevitably the appellant has ‘cherry-picked’ reviews which it believes supports its case.

4.1.16 Our client’s pharmacy in Tyldesley is currently rated at 4.4 out of 5 by comparison as shown below. [see Appendix D for Committee]

Davina Pharmacy

4.1.17 The appellant states that it is speculative to suggest that deprivation has improved.

4.1.18 However, it overlooks the fact that it is for the applicant to provide evidence that supports its case. The appellant seems to be comfortable making its own speculations and expects the committee to accept these.

4.1.19 The appellant suggests that there is not a direct link between the levels of car ownership and the index of multiple deprivation. This is correct but the relevance of this statement is not clear when census data (which is more recent than the IMD data) clearly shows that the area has higher than average levels of car ownership. Whether there is a degree of

deprivation or not, it is a matter of fact that the vast majority of residents in the proposed area have access to a car.

4.1.20 The suggestion that some residents may not be comfortable driving in poor weather conditions is not evidenced. Of course there may be times in very extreme weather when people may not wish to drive but these times are likely to be very few and far between. In such conditions we would suggest it is unlikely that patients would wish to walk to the proposed location in any event.

4.1.21 Whilst it may well be the case that, at the time of the last census, the number of residents stating that they had bad or very bad health was higher than the national average, this is of little relevance for patients who are able to drive to a pharmacy.

4.1.22 Again, the appellant looks to support its case with demographic data, but its comment that the relatively affluent LSOAs it relies on to support its case have higher than the average number of people over the age of 65 is nothing more than a statement of fact, without direct correlation to the regulatory tests. The opponent fails to discuss the fact that car ownership in these LSOA areas is even greater. In LSOA 025E, only 1.4% of homes do not have a car, and in LSOA 025C, 11.8% of homes do not have a car. This compares to the national average of 23.5%. These other LSOAs are all further from the appellant's proposed location so the patients it proposes to serve would have to travel to a pharmacy in any event.

4.1.23 With regard to population growth and new developments, we have been unable to find any evidence in respect of the number of homes being constructed in each of the developments listed by the appellant or how many of these are occupied. We invite the appellant to provide the Committee with this evidence, rather than relying on Google satellite images. We remind Prescription Hub Limited that the burden of proof rests with the applicant.

4.1.24 It is noteworthy that the appellant refers to the "nearby villages of Boothstown, Ellenbrook and Astley". The distances from the proposed site to these villages are 1.2 miles, 1.3 miles and 1.2 miles respectively. If the appellant accepts that these are 'near' to its proposed site then it must also accept that so are alternative pharmacies. The appellant is also fails to mention that each of these villages already has at least one pharmacy at present.

4.1.25 The appellant goes on the claim that Parr Bridge is "uniquely accessible due to its central location". We dispute the notion that the site is centrally located bearing in mind it is at the edge of the residential area as can be seen below [see Appendix D for Committee], where the medical centre is shown with a red pointer.

4.1.26 In respect of the journey on foot to alternative premises, the appellant makes the mistake of assuming that residents start their journey at the proposed site.

4.1.27 Most of the appellant's best estimate area comprises a retail park. Clearly nobody lives there. Furthermore, as shown in the image above, [see Appendix D for Committee] most people live to the west or the south of the proposed location. The appellant does not explain its rationale when it quotes distances from the retail park because the vast majority of people who require pharmaceutical services will travel from their homes which may be some distance away and closer to other pharmacies.

4.1.28 It makes no sense to suggest that elderly patients, those with disabilities, or people with young children would travel to the retail park first then start their journey to access the pharmacy. We accept that there will be some people who travel to the retail park to use the medical centre but these people will travel from their homes then return home afterwards. They may well have access to a pharmacy on the way, or near to their home.

4.1.29 The appellant makes much of the age of residents, particularly those living in LSOA 025E. As shown in the map provided with our client's initial objection, almost all of the housing within that LSOA is to the north of the guided busway, which the appellant claims is difficult for pedestrians to cross. It cannot have it both ways.

4.1.30 The appellant then refers to its claim that the time taken to drive to alternative pharmacies is 14 minutes, yet provides evidence to support this claim which shows a travel time of 6-12 minutes at peak times. Most of the time (off-peak times) this journey will be less than 5 minutes. Again the appellant suggests that not all residents would be comfortable driving in adverse weather conditions but we would suggest there are very few people who would prefer to walk in adverse weather than to drive.

4.1.31 In respect of the inability of residents to afford fuel or bus fares, it is noteworthy that the appellant provides absolutely no evidence from patients themselves which supports this assertion.

The Appeal

4.1.32 We now go on to respond to the letter of appeal dated 4th July 2025.

4.1.33 The appellant starts its letter by claiming that NHS England have failed to properly evaluate regulation 18. Putting aside the fact that it is clear from the commissioner's decision report that it considered all matters it was required to consider, the Committee will consider this matter afresh rather than by reference to the legitimacy of the NHS England decision.

4.1.34 Again we deal with each of the points raised by the appellant in the same order they are discussed within the letter of appeal.

Current Service Provision

4.1.35 Whilst it is correct that the ICB have made reference to distances from post code area M29, it is also the case that the appellants best estimate area was not specifically limited to postcode M29 8RZ either.

4.1.36 The appellant states that it agrees “not all residents will start their journey here”. In fact no residents whatsoever will start their journey from that postcode because this is specifically limited to the retail park and nobody lives at that location. For that reason we disagree with the assertion that the proposed site “represents a sensible place to evaluate these journeys”.

4.1.37 It would appear to make more sense to consider patient journeys from the densely populated residential areas to the south which are, of course, closer to the existing pharmacies.

4.1.38 Whilst it may be the case that Peak Pharmacy have previously applied to open a pharmacy in Mosley Common, that does not add any weight to the suggestion that a pharmacy is needed. In fact the multiple refusals of previous applications is evidence that a pharmacy is not required.

4.1.39 We note the two maps provided by the appellant.

4.1.40 In respect of figure 1, whilst it is undisputed that there is not a pharmacy within 1km of the proposed site, the appellant errs by leaping to the conclusion that “by the PNA’s very own criteria…….. this clearly indicates a geographical gap in pharmaceutical provision”.

4.1.41 This is simply not the case. Nowhere within the PNA is there a statement that a gap exists where there is no pharmacy within 1km. This map is simply intended to show that many residents of the area do have a pharmacy within 1km of their homes. That is a very different point.

4.1.42 There is no suggestion that any party is questioning the reasonableness of the PNA, but the appellant fails to provide any evidence from the PNA which suggests that patients who do not live within 1km of a pharmacy do not have reasonable access to pharmaceutical services.

4.1.43 In fact, the appellant makes no reference at all to the fact that the HWB, who are of course the authors of the PNA, stated in their representations on the original application “The PNA did not identify any services which were not provided in the health and well-being board area that would secure improvements or better access to pharmaceutical services”. It is very clear from the broader comments made by the HWB that they do not believe the application addresses any current unmet need.

4.1.44 In respect of figure 2, we do not dispute the suggestion that the LSOA within which the applicant's best estimate is located is relatively densely populated. However, as we have shown previously, the retail park within which the applicant proposes to open is at the very edge of this area rather than within the heart of the residential area. Areas a short distance to the north and the east are clearly very sparsely populated. In any event, it does not automatically follow that residents living within densely populated areas do not have reasonable access to pharmaceutical services provision.

4.1.45 Whilst it is the case that there is not a pharmacy within 1km of Boothstown Medical Centre, the Committee will be mindful that the medical centre is located within a retail park setting at the very edge of the residential area. It is clear that most patients who attend will travel from a reasonable distance away and many of them will do so by car given the nature of the location.

4.1.46 Again we point to the fact that, regardless of the statements provided from the PNA, the HWB did not believe that the proposed pharmacy addressed any perceived gap in service provision. As we have discussed previously it is far more relevant to consider where patients live, when considering their access to pharmaceutical services, than it is to consider where they access their medical services.

Housing Developments & 2025 Draft PNA

4.1.47 The appellant starts by discussing the 2025 draft PNA. We do not need to remind the Committee that the regulations require it to consider the current PNA, so until the 2025 PNA is published it has no strict relevance in respect of the regulatory tests.

4.1.48 However, as the appellant has raised this, we respond to its comments anyway.

4.1.49 As the appellant quite correctly states, reference to Mosley Common is made in respect of "future needs, improvements and securing better access".

4.1.50 As the Committee is aware, statements in the PNA in respect of future needs are intended to identify "specified future circumstances" that will give rise to the need for additional pharmaceutical services. Whilst the current wording of the draft PNA does not discuss specified future circumstances, it is clear that the HWB view is that this is a matter for the future rather than a current need. In other words they simply acknowledge that ongoing population growth may create a need in the future. If the HWB was of the view that the need exists now this would have been included in the draft PNA as a current need.

4.1.51 It is also noteworthy, that this draft PNA on which the appellant places weight, states, on page 11, "Based on the information within the population health profile and the neighbourhood analysis, there is adequate provision of necessary pharmacy services in Wigan Borough. However, following the recent closure of a pharmacy, an exception has been identified in Hindley Green within the Ince, Hindley, Abram and Platt Bridge Neighbourhood." We note that the proposed location is not within Hindley Green, so this potential identified need is not relevant.

4.1.52 In respect of new developments, we have commented on these already, although we note that the appellant refers to 244 homes in Bridgwater View, despite its statement in its response to third party comments that there were 440 homes here. This reinforces the view that the information provided by the appellant cannot be relied upon unless clear and compelling evidence is provided.

4.1.53 In respect of the Kellen Homes Development, this is currently at the planning stage only. Furthermore, the site is located off Wellington Drive, which is to the north of the busway the appellant states is difficult to cross.

4.1.54 References to the Master Plan of proposed future developments and speculation in respect of how many residents these will attract should not be afforded any significant weight as there is no certainty these developments will ever come to fruition.

Deprivation

4.1.55 The appellant claims that the ICB failed to consider the implications of deprivation, but it is very clear from the fact the ICB specifically discussed this in its decision report that it did consider the current level of deprivation. It is also clear that it concluded this did not automatically lead to the need for an additional pharmacy.

4.1.56 The data provided by the appellant shows that the levels of bad / very bad health are only marginally higher than the national average so this does not constitute evidence that there is a specific need that arises due to the number of people with worse than average health. Furthermore, as we have stated previously, the 2021 demographic data is likely to be out of date bearing in mind the new residential developments discussed by the appellant.

4.1.57 It makes no sense to suggest that people who own a car, and therefore incur the fixed costs of running one, would choose not to use it because of the cost of fuel. The appellant acknowledges that there are several pharmacies within 1.5 miles of its proposed location. We would suggest that there are very few people who would find that the fuel cost associated with such a short journey would prohibit them from using their car.

4.1.58 Equally, in respect of bus travel, those people who don't own a car are far more likely to make extensive use of public transport. It is noteworthy that the Bee network offers 7 day, 28 day and annual bus tickets, that can be used for unlimited travel across the Greater Manchester network. These tickets offer residents a significantly cheaper option then the costs of running and maintaining a car. Needless to say, elderly residents are entitled to free bus travel anyway, as they are throughout the country.

Mosley Common

4.1.59 We note the amenities that are provided in Mosely Common. The majority of the facilities listed in the retail park, other than the supermarket, cannot be said to meet the everyday needs of local residents. For example there is no post office, bank, library, leisure centre or secondary school. Those listed in Mosely Common generally are spread throughout the residential area.

4.1.60 The appellant states that residents are “forced to undertake separate one off journeys” to access a pharmacy, however there is no evidence

that this is the case. Existing pharmacies are located close to other amenities used by residents such as those in Tyldesley, or the Tesco and Boots stores in Walkden, which are located in a much more substantial retail park area.

4.1.61 In respect of the Boothstown Medical Centre, we note the comment that the current patient list size is 7,936. We also note that prescribing data (source Pharmdata) shows that the surgery prescribed an average of 9,945 items per month in the 3 months to April 2025 (the most recent data available). This equates to 1.25 items per patient per month, which is significantly lower than the national average of 21 per year, or 1.75 per month (source NHS Business Services Authority https://nhsbsa-opendata.s3.eu-west2.amazonaws.com/pca/pca_summary_narrative_2023_24_v001.html?utm_source=chatgpt.com – see below) [see Appendix D for Committee]

4.1.62 This does not support the assertion by the appellant that patients registered with this medical centre have a higher than average need to access pharmaceutical services. In respect of emergency prescriptions, local pharmacies all provide a delivery service and patients also have access to a wide range of online pharmacies who would be able to provide emergency medication for any patients in need who could not travel to one of the existing pharmacies themselves.

4.1.63 In respect of the Pharmacy First service, we agree that this is best provided from community locations, but the applicant proposes to open within a retail park.

4.1.64 Furthermore, the service is largely intended to reduce the need for patients to attend medical centres so arguably it is better to be provided away from medical centre locations to ensure that patients have increased choice in respect of where they access their health services generally.

4.1.65 The appellant goes on to discuss the guided busway again, but contradicts its own assertions that residents living to the north of the busway (many of whom are elderly according to the appellant) would be able to access the proposed pharmacy. Again the appellant cannot have it both ways.

4.1.66 Finally, it will not have escaped the Committee's attention that the appellant has not provided any information or evidence whatsoever from local people or their representatives. It relies on data, maps and assumptions but does not provide a shred of evidence that a single patient living in the area proposes to serve currently has any difficulty accessing pharmaceutical services.

4.1.67 It is increasingly common, where applications are made for inclusion in the pharmaceutical list, to provide specific evidence from patients setting out why they are unable to access the existing pharmacy network. Without this evidence we believe the Committee cannot possibly be satisfied that patients living within the area do not currently

have reasonable choice in respect of access to pharmaceutical services.

Conclusion

4.1.68 Our client's position is that the information provided by the appellant does not constitute evidence that would lead the Primary Care Appeals committee to reach a different conclusion to the ICB.

4.1.69 In our opinion, this application can be refused without the need for an oral hearing. However, should Primary Care Appeals wish to convene an oral hearing to determine this matter, our client would wish to attend."

In a letter to the Commissioner dated 25 March 2025, Pharmacy Sales and Consultancy on behalf of Davina Pharmacy stated:

4.1.70 "We act for Davina Pharmacy Limited (trading as Davina Pharmacy) and have enclosed a letter of authorisation from our client accordingly.

4.1.71 Our client has passed us a copy of your letter dated 21st February informing it of the above application.

4.1.72 On behalf of our client, who provides pharmaceutical services from premises at 155 Elliott Street, Tyldesley, I wish to object to this application and make the following comments in response:

Regulatory tests

4.1.73 This application has been submitted pursuant to Regulation 18 of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (as amended).

4.1.74 The ICB is required to determine whether granting the application would secure improvements in, or better access to, pharmaceutical services in the HWB's area which were not included in the relevant pharmaceutical needs assessment.

4.1.75 The ICB must have particular regard to the matters set out in regulation 18(2). It must consider whether it is satisfied, having regard in particular to the desirability of

4.1.75.1 There being a reasonable choice with regard to obtaining pharmaceutical services in the area of the relevant HWB;

4.1.75.2 People who share a protected characteristic having access to services that meet specific needs for pharmaceutical services that, in the area of the relevant HWB, are difficult for them to access;

4.1.75.3 There being innovative approaches taken with regard to the delivery of pharmaceutical services

4.1.76 that granting the application would confer significant benefits on persons in the area of the relevant HWB which were not foreseen when the relevant pharmaceutical needs assessment was published.

4.1.77 To the extent that there is a burden of proof, this burden rests with the applicant. It is for the applicant to demonstrate to the ICB that the application meets the regulatory test, not for our client to demonstrate that it does not meet the relevant regulatory test.

4.1.78 It is our opinion that the information provided by the applicant in this case is not sufficient to satisfy the ICB that the requirements of Regulation 18 have been met.

Supporting information provided by the applicant

4.1.79 We address the comments made by the applicant in the same order they are provided in its supporting information.

4.1.80 The applicant starts by discussing the area of Mosley Common, Wigan, but does not provide any maps clearly showing the area it proposes this pharmacy would serve. It refers to three lower super output areas (LSOAs) “and the surrounding areas” but without maps this information is meaningless.

4.1.81 In order to assist the ICB we have provided below three maps which shows the boundaries of the three LSOAs listed by the applicant. In each case the proposed location for the pharmacy is marked with a green star. [see Appendix E for Committee]

4.1.82 It is noteworthy that these LSOAs include significant areas of green spaces. The applicant goes on to discuss the guided busway to the north and the A580 to the south, suggesting that these make “alternative pharmaceutical provision difficult to access for those residing near the proposed site”.

4.1.83 The applicant has provided no information to show why it thinks these physical features make it difficult for residents to travel freely around the area. The A577 Mosley Common Road crosses the busway immediately to the north of the applicant’s proposed site, and light-controlled pedestrian crossings are provided. The same applies at the A580 East Lancs Road, where light-controlled crossings are provided at numerous points. It is also noteworthy that the applicant does not mention Ellenor Brook as a barrier to movement despite the fact this arguably isolates the proposed site from the residential areas in the south of Mosley Common as can be seen below:

4.1.84 Furthermore, the LSOA areas that the applicant says will be served by this new pharmacy include substantial areas to the north of the busway. This contradicts the applicant’s suggestion that the busway is a barrier to movement.

4.1.85 The applicant goes on to discuss the 2019 index of multiple deprivation. It correctly points out that LSOA Wigan 029D was within the top 20% most deprived areas at that time. In fact it was ranked 6,454 out of

32,844 LSOAs in England in 2019, so was only just inside the top 20% (19.6%). Importantly, the applicant makes much of the recent new developments in the area (which we discuss more later). We would suggest that the building of these new houses will have changed the demographic profile of the area to the extent that it is unlikely to remain in the top 20% areas of deprivation in England.

4.1.86 It is for the applicant to provide up to date information to support its case in respect of deprivation given that the burden of proof rests with the applicant.

4.1.87 It is also noteworthy that LSOA Wigan 029C was ranked 21,157 in the index of multiple deprivation (i.e. within the 40% least deprived areas of the country) and LSOA Wigan 025E was ranked 24,445 (within the 30% least deprived areas). It is very clear, therefore, that the wider area the applicant claims will be served by this pharmacy is not deprived on any measure.

4.1.88 The applicant then discusses the 2011 census data, stating that the population of Mosley Common was approximately 3,200 residents. Again it is not clear how the Mosley Common was defined at that time. It is noteworthy that the applicant has not provided 2021 census data which would appear to be far more relevant.

4.1.89 For the three LSOAs identified by the applicant, the populations in 2021, using census data (source Nomis) were as follows:

4.1.89.1Wigan 029D – 2,731

4.1.89.2Wigan 029C – 1,581

4.1.89.3Wigan 025E – 1,303

4.1.90 So there were a total of 5,615 residents in these LSOAs at the time of the most recent census. We are mindful that these LSOAs include significant areas on the opposite side of the busway which, using the applicant's logic, hinders the accessibility of its proposed site and are also, presumably, the applicant considers these areas to be outside Mosley Common.

4.1.91 The applicant goes on to discuss three new residential developments but does not indicate where these are, when they were built (i.e. before or since the 2021 census) or provide any evidence to support its assumptions in respect of the number of houses.

4.1.92 Without this information the ICB will be unable to ascertain the extent to which there may or may not have been significant population growth since the last census.

4.1.93 It is also worth noting that residents of new developments are typically far more likely to own cars and to be younger (and therefore healthier) than the wider population. To illustrate car ownership, 2021 census data for LSOA Wigan 029D (which the applicant claims is highly deprived) shows that only 16.7% of homes did not own at least one car at the time

of the 2021 census compared to the national average of 23.5%. This is not what would be expected in an area of high levels of deprivation.

4.1.94 We note the amenities that are listed by the applicant within the Parr Bridge Retail Park. Retail parks (and this one is no exception) are generally designed for, and located within, areas that cater for car users. This is evident from the very large car park provided and the fact that Starbucks has a 'Drive Thru'. This is not a surprise when the high levels of car ownership are taken into account. When considering the accessibility of existing pharmaceutical services, therefore, the ICB will be mindful that the vast majority of people visiting these amenities will be travelling by car.

4.1.95 In respect of the comments made about planning permission for a further 1,000 homes, the Appeal Authority has commented on many occasions that it is not appropriate to take into account developments that may or may not be forthcoming in the future when considering whether residents currently have reasonable access to pharmaceutical services.

4.1.96 In considering the villages around the wider area, the applicant provides no information whatsoever to explain why its proposed location will be any more accessible for these residents than the existing pharmacies already located around the area. The suggestion that there may be 18,000 people who might access the proposed pharmacy is completely without foundation.

Proposed Location

4.1.97 The applicant notes, as we have discussed above, the "ample parking" catering for motorists. No information is provided as evidence that a significant number of residents walk to this site.

4.1.98 The applicant then provides a map which it claims shows "alternative pharmaceutical provision". This map fails to show alternative provision to the south-west in Astley, to the west in Tyldesley (where our client's pharmacy is located) or to the north west in Walkden as can be seen on the map below.

4.1.99 The applicant repeats its claim that the area is "delineated by the E Lancashire Road to the South/ the Guided Busway to the north", but even if we disregard the pharmacies in the wider area, the applicant's own map shows that there is a pharmacy to the east of its proposed location that is on the same side (south) of the busway.

4.1.100 The images provided are not disputed but these reinforce our client's position that this is a location that is designed to be accessed by motorists.

Patient journeys

4.1.101 The applicant again mentions the 6,000 residents of the LSOAs it identified and the "18,000 residents who live outside of Mosley Common

but would likely utilise the facilities within the Retail Park" without providing any evidence to substantiate this claim.

4.1.102 The proposed location is surrounded by larger towns and villages such as Tyldesley, Walkden and Astley which provide a much greater range of amenities for residents of the wider area such as a choice of supermarkets, banks, post offices etc, that will be a far greater draw than the limited amenities at Parr Bridge Retail Park.

4.1.103 We note the comment that the nearest pharmacy is 1 mile away and that "distance in itself is a barrier to access". We dispute this assertion for two reasons. Firstly we would suggest that travelling 1 mile for pharmaceutical services is perfectly reasonable for many residents particularly those who are car owners or are regular users of public transport. Secondly, given that the area immediately around the proposed location is sparsely populated (to the north and east), very few people actually live close to the proposed location, so the journey they would face to access pharmaceutical services may be very different depending on where they are travelling from.

4.1.104 In terms of the significance of the proposed location being adjacent to the Boothstown Medical Centre, given that most prescriptions are for repeat items that do not require a prior visit to a surgery, the number of people who need to access a pharmacy immediately following a visit to the GP is likely to be far lower than the numbers suggested by the applicant.

By Foot from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy, M28 1FB)

4.1.105 Setting aside the point made above, that there is no reason patients would start their journey at this location, we note that the journey described by the applicant is a distance of 1 mile or a 23-minute walk.

4.1.106 However, the applicant fails to provide any evidence to show that residents are required to make this journey on foot. As we have shown, car ownership is high so there is no reason to believe there are a significant number of residents who have no choice but to walk. If there are any residents that fall into this category then they would also be required to walk to towns and villages further afield to access many of the amenities that are not available in Mosley Common.

4.1.107 It is likely that there will be some residents who walk to the new medical centre because this provides an opportunity for exercise. But this is not the same as saying they have no choice but to walk, so it does not follow that this distance automatically means that they do not have reasonable choice in respect of access to pharmaceutical services.

4.1.108 Given that the much [sic] of the area around the proposed location is sparsely populated it is highly unlikely that many elderly or disabled patients walk to the medical centre at present. In any event, the applicant has provided no evidence that they do.

4.1.109 In terms of the comment made about walking being the “preferred mode of transport for the majority of residents” we would strongly dispute this. As we have already shown levels of car ownership are very high. It would make no sense for residents who have already incurred the costs of owning a car not to use it should they need to.

4.1.110 In respect of the residents in Mosely Common who live to the west of the proposed site, their journey to a pharmacy depends on exactly where they live. Those residents living to the southwest are likely to find themselves closer to the pharmacies in Anstey than the Peak Pharmacy illustrated by the applicant in its map.

By Car from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy, M28 1FB)

4.1.111 The applicant has provided no evidence whatsoever to support its assertion that this journey by car could take up to 14 minutes. The distance by car is 1.2 miles, yet no explanation is provided by the applicant as to why it should take so long to travel this route by car. Reference to “busy traffic hours” are not backed up with any evidence.

4.1.112 The applicant states that this particular pharmacy is not located in a substantial retail centre so residents are likely to have to make a special journey to access pharmaceutical provision here. This, of course, completely ignores the presence of numerous other pharmacies that patients can easily drive to when going about their daily lives. For example, our client’s pharmacy in Tyldesley is less than 2 miles away by car, a journey of only a few minutes.

4.1.113 There are several pharmacies accessible within a 10-minute drive of the proposed location, including Tesco Pharmacy in Walkden, a location that many Mosley Common residents will access to do their grocery shopping. This Tesco store benefits from a large free customer car park.

By Public Transport from Proposed site to current nearest pharmacy (Tims & Parker Pharmacy, M28 1FB)

4.1.114 The applicant describes the bus journey from “outside the Proposed Site”. Of course the applicant has provided a best estimate area, so there is no ‘proposed site’. Furthermore, as discussed previously, very few people live at or near the best estimate area, so they will not start their journey from there. Journey times, bus routes and bus frequency will vary therefore.

4.1.115 Conveniently, at this point in its document, the applicant forgets the busway, which provides quick and easy access to alternative pharmacies. There are stops on the busway within 150m of Tims and Parker and also within 200m of the Tyldesley pharmacies. Buses travel along this route every 8 minutes, so reference to 30-minute bus waits do not reflect the real world.

Conclusion

4.1.116 Most importantly, none of the submissions made by the applicant are backed up with any evidence whatsoever from people who actually access pharmaceutical services in the Mosley Common area.

4.1.117 In conclusion, this application falls a long way short of providing any evidence that might lead the ICB to conclude that granting it would secure improvements or better access to the provision of pharmaceutical services in the area. For that reason, the application should be refused.

4.1.118 Should the ICB decide to hold an oral hearing I can confirm that our client would wish to attend."

4.2 Community Pharmacy Greater Manchester

4.2.1 "Thank you for your letter dated 23rd July 2025, informing us of the above application appeal and inviting us to make representations to the appeal submitted by Prescription Hub Ltd regarding the application to open a pharmacy in Mosley Common, Wigan. Community Pharmacy Greater Manchester (CPGM) subgroup disputes the assertion that this application meets the test under Regulation 18 for "unforeseen benefits." Our objections are based on local insight, the clear requirements of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations, and the consistent application of the Pharmaceutical Needs Assessment (PNA) process.

4.2.2 The unforeseen benefits route is intended for genuinely new or unexpected circumstances that could not reasonably have been anticipated when the current PNA was prepared. The circumstances described in this application, modest housing growth, existing deprivation levels, GP proximity, are not new or unexpected. Applicants must also provide evidence that a significant benefit would result for patients in the area and CPGM does not believe that the appeal provides this evidence.

4.2.3 The 2022 Wigan PNA does not identify a gap in pharmaceutical provision for Mosley Common, and there are no supplementary statements to change that position. There is, therefore, no formal recognition of unmet need. The applicant relies on the 2025 draft PNA. However, applications must be assessed against the published PNA (2022) and any formal supplementary statements, of which there are none in relation to Mosley Common. Draft PNAs have no legal status until approved.

4.2.4 Even if the draft PNA were relevant, it lacks key information to justify a conclusion of need:

4.2.4.1 No transport modelling or travel-time analysis

4.2.4.2 No assessment of public transport links to nearby pharmacy provision

4.2.4.3 No assessment of existing provider capacity

4.2.5 All of which have been referenced in the CPGM response to the draft 2025 PNA. Mosley Common is well connected by regular bus services to Tyldesley, Walkden, Astley and Boothstown, all of which have established pharmacies. Residents frequently cross HWB boundaries for healthcare, and this travel behaviour must be reflected in any robust assessment.

4.2.6 The appeal and draft PNA rely on a 1km (0.62-mile) access measure. This is not the standard used consistently across Greater Manchester or nationally. In practice, most HWBs. including other Greater Manchester HWBs, apply a 1-mile radius. CPGM has also raised this in its formal draft PNA consultation response, warning that reliance on a 1km standard risks overstating access issues.

4.2.7 The draft PNA references housing development in Mosley Common, but the key current development involves approximately 175 homes, a modest increase in population that does not, in isolation, warrant new pharmaceutical provision.

4.2.8 The appeal claims that the local population has increased by 85% over 13 years due to housing growth, equating to “at least 2,700 new residents surrounding the proposed site.” This assertion is potentially misleading as no baseline definition or source for 'Mosley Common' is given. If a small starting population is used, percentage growth can appear disproportionately large despite modest increases. The calculation appears to include historic and completed developments whose residents are already well served by existing pharmacies. The increase has occurred gradually over more than a decade, which is not the sudden change Regulation 18 envisages. No evidence has been provided to show that this population change has resulted in capacity strain or material access problems.

4.2.9 Population growth alone is insufficient for an unforeseen benefits application, it must be demonstrated that the change is both unforeseen and results in a significant, unmet need. The appeal offers no such evidence.

4.2.10 A more proportionate and responsible approach would be to monitor demand over time, using thresholds and real-time data, and to initiate a formal PNA review only if measurable service pressures emerge.

4.2.10.1 The 2019 Indices of Multiple Deprivation show:

4.2.10.1.1 LSOA Wigan 029D: 2nd decile (most deprived 20%)

4.2.10.1.2 LSOA Wigan 029C: 7th decile (less deprived).

4.2.11 This demonstrates a mixed deprivation profile. New developments such as Bellway’s Trilogy site, with homes priced at £400–450k, suggest an influx of higher-income households, weakening arguments for need based solely on deprivation.

4.2.12 The applicant has not demonstrated:

4.2.12.1 Any formally identified shortfall in service access

4.2.12.2 That existing pharmacies are at or over capacity

4.2.12.3 That travel to existing pharmacies is unreasonable given available transport links and levels of car ownership

4.2.13 Mosley Common is served by a strong surrounding network of pharmacies in:

4.2.13.1 Tyldesley and Astley

4.2.13.2 Atherton and Walkden

4.2.13.3 Boothstown (Salford HWB)

4.2.14 These locations are reachable by public transport and car, and there is no evidence they are oversubscribed or inaccessible.

4.2.15 In summary, the CPGM applications subgroup believes this application does not meet the Regulation 18 test for unforeseen benefits because:

4.2.15.1 The circumstances were foreseeable and/or known during the PNA process

4.2.15.2 The current PNA shows no gap and there is no supplementary statement

4.2.15.3 The appeal relies on a draft PNA with no legal status

4.2.15.4 There is insufficient evidence of a significant, patient-focused benefit that cannot be met by existing services

4.2.16 CPGM applications subgroup would welcome continued communication on the progress of this application and request that we are kept informed of any developments."

5 Observations

The following observations were received by NHS Resolution in response to the representations received on appeal.

5.1 HEALTHCARE PLUS CONSULTING LTD ON BEHALF OF THE APPLICANT

5.1.1 "Thank you for your letter dated 27th August 2025. We note the responses made by interested parties on my client's appeal and respond accordingly here.

Community Pharmacy Greater Manchester (CPGM)

5.1.2 We agree with CPGM's statement that applications must be assessed against the published Pharmaceutical Needs Assessment (PNA), which, in this case is the Wigan 2022-2025 PNA. We accept that the 2025 draft PNA for Wigan has no legal status until approved but

reiterate that statements made within it still bear relevance for the context of our client's application. For example, we highlight references to the "considerable development which exceeded the expectation during the period covered by the previous PNA" (Wigan PNA Draft 2025, pg.49), relating specifically to Mosley Common. Such an observation clearly indicates that the current PNA did not encompass the full extent of developments in Mosley Common and therefore undermines CPGM's view that there has been "modest housing growth". Hence this application is submitted under Regulation 18 to provide unforeseen benefits, as the scale of housing development was very much unforeseen at the time of writing of the 2022 PNA.

5.1.3 CPGM also state that their objection is based on the "consistent application of the Pharmaceutical Needs Assessment Process" yet take issue with the 1km parameter used throughout the 2022 PNA and the appeal, stating that "this is not the standard used consistently across Greater Manchester or nationally". Not only is this 1-kilometre metric used in the PNA when assessing patients' distance from a pharmacy but was also used as a parameter for pharmacies proximity to a GP – this has also been highlighted in prior correspondence. For the avoidance of doubt, we once again direct CPGM to page 55 of the 2022 Wigan PNA, which states: "pharmacies are well distributed geographically covering the main areas of population, with most of the population living within 1km of a pharmacy".

5.1.4 It is clear that the PNA sets a 1km criteria as representative of the necessary access to pharmaceutical provision. The Committee will be aware that the PNA is a legal document and any parameters within represent the legal tests used to assess pharmaceutical provision within the relevant Health Wellbeing Board (HWB). Therefore, any comments questioning the use of these parameters should be dismissed as they directly question the reasonableness and legality of the PNA.

5.1.5 CPGM also take issue with the population figures provided, however, these figures are based on factual census data, and completed developments as recognised by CPGM. We do not understand how an 85% increase in population over a decade can be classed as "gradual", especially when compared to the previously mentioned national averages.

5.1.6 Whilst we accept that some parts of Mosley Common render the area as not entirely deprived, it is of note that the LSOA of our client's proposed site (Wigan 029D LSOA) falls within the top 20% most deprived areas in the country. This is also highlighted by CPGM. We submit that pharmaceutical provision should be doubly concentrated in areas of high deprivation, and thus local residents living at/near the proposed site are more likely to be reliant on pharmaceutical services. CPGM state that alternative pharmacies are "reachable" and note that there is no evidence that a significant benefit would result for patients in the area. In response, our client provides 50 emails and letters from local residents highlighting the issues they are facing with accessing alternative provision.

5.1.7 These emails have been numbered and can be found in Appendix A [see Appendix G for Committee]. We urge the Committee to read each email in detail, as they reveal the situation on the ground, including difficulties accessing current pharmaceutical provision. Common points that were highlighted include, but are not limited to:

5.1.7.1 Heavy traffic in the area

5.1.7.2 Issues with public transport

5.1.7.3 Inability to access pharmacies by foot

5.1.7.4 Population growth in the area

5.1.7.5 Recent and ongoing housing developments

5.1.7.6 Capacity issues at current pharmacies

5.1.7.7 Very good access to Parr Bridge Retail Park

5.1.7.8 Lack of pharmacy with the Parr Bridge Health Centre

5.1.8 It is of note that CPGM only consider access to the existing pharmacies by public transport and car.

5.1.9 Perhaps this is due to the excessive distances involved, thus rendering current pharmaceutical provision as difficult to access by foot. We remind the Committee that distance in itself is a barrier to access. In fact, this sentiment is shared with local residents who reveal that;

"The closest pharmacies are in neighbouring towns like Walkden or Tyldesley. These aren't easily accessible on foot and often require car journeys or public transport" – Email 1

"Nearest pharmacy not within walking distance" – Email 17

"Here in Mosley common we have par bridge good for other things but still have to go far by bus or uber for pharmacy or just hope to be better soon. It would be great for our shopping centre to have a pharmacy" – Email 18

"Without a car it has been hard to get to the pharmacies in Boothstown and Ellenbrook with poorly children" – Email 25

"The nearest pharmacy is Ellenbrook / Boothstown. This is a very long walk for us nondrivers." - Email 29

"It would be very much appreciated by all local people and more so the elderly people of Mosley Common to be able to walk to a local pharmacy! There are a lot of elderly people in the area, myself included and who also can't walk properly and don't drive!" – Email 30

"It means people who live in the community have to travel to a chemist and if you have no transport, it will mean walking, which can sometimes be a distance to Ellenbrook or Boothstown." – Email 35

"There isn't enough provision currently in the area, the nearest pharmacy is too far away, especially for the elderly and those of low socioeconomic background who aren't able to afford a car" – Email 43

5.1.10 Further, CPGM outlined patient journeys by public transport and car without considering the road conditions such as traffic congestion and roadworks, or the frequency and availability of bus services. In particular, the comment that Mosley Common is well connected by regular bus services is not true. We submit that these services are in fact infrequent operating once every hour during peak times, and once every two hours in non-peak times. This can be seen by the following insights from local residents:

"There is a bus 553 but it serves only once every hour during peak hours and once every 2 hours for non-peak hours." – Email 14

"It's in Boothstown, it's not close enough to walk there. There is so much traffic on the road. Public transport is an issue the bus is hourly and tragic too much. I don't drive sometimes take an uber. It's inconvenient." – Email 18

"The area has small roads but population has increased so much. Going to other places is far and not easy to travel due to traffic and bus connections not great." – Email 18

"It means people who live in the community have to travel to a chemist and if you have no transport, it will mean walking, which can sometimes be a distance to Ellenbrook or Boothstown." – Email 35

"Our nearest pharmacy is in Tyldesley or Boothstown. We mainly use public transport which can be unreliable on occasion to collect our scripts." – Letter 4

"Mosley Common has a large social housing estate with accommodation for the elderly and disabled residents most of whom struggle with infrequent public transport." – Letter 5

5.1.11 All insights above demonstrate that local public transport in the area is not a reliable method of accessing pharmaceutical services. We cannot consider this as constituting sufficient access or reasonable choice to pharmaceutical services, especially when we consider that they are forced to leave their community to access pharmaceutical provision. Due to the long distances and poor public transport availability, journeys via car is the only option. However, residents have alluded to heavy traffic and difficulties accessing surrounding pharmacies by car. Some examples of this are included below:

"Currently we have to travel into Tyldesley and this can often be a 30 to 45 minute round trip due to the sheer volume of traffic and it's getting worse" – Email 2

"With the increase in housebuilding to the area and only one main road throughout the village into Tyldesley due to the continuous traffic congestion it can take 20 to drive the short journey" – Email 5

"it would be nice to have a local pharmacy I don't have to drive to. Especially in the traffic, getting to Ellenbrook or Boothstown is difficult in peak times when busy family and work lives make time precious." – Email 6

"We both have health needs that require monthly prescriptions and can't always get in to Tyldesley to collect them on time due to the traffic congestion" – Email 7

"The closest pharmacy is located in Boothstown or Tyldesley which, in distance is not far but with traffic congestion around the area a 5 minute car journey turns into 20mins or more" – Email 8

"if we get a prescription we then have to drive to Ellenbrook Pharmacy to collect any medication. This isn't within walking distance as we have a disabled daughter and to drive can take 30 minutes in traffic." – Email 10

"Heavy traffic means it takes a long time to reach other pharmacies" – Email 11

"I live nearby & currently have to drive to nearest pharmacy in ellenbrook or tyldesley which is inconvenient" – Email 12

"The area has small roads but population has increased so much. Going to other places is far and not easy to travel due to traffic and bus connections not great." – Email 18

"I currently have to travel and the parking is very limited." – Email 20

"As everyone in this area will know, the surrounding roads are usually very busy so the less cars on the road for short journeys the better" – Email 27

"For those of us that live at the east end of Tyldesley it can often take 1/2 hour to get up to the town due to the roads being gridlocked...and its getting worse.....whereas a short 10 minutes walk to Parr Bridge would be ideal" – Email 28

"We are in real need of a local pharmacy rather than having to travel into Tyldesley or Walkden...Tyldesley also has parking issues. Lots of parking at Parr Bridge." – Email 34

"Our doctors is based at Parr Bridge and with the amount of traffic getting to Tyldsley to pick our prescription up is a nightmare!" – Email 41

"This has led to increased traffic and a growing population, many of whom will require access to pharmaceutical services and healthcare advice." – Letter 1

"Currently, the nearest pharmacy is in Boothstown. However, this location is not convenient for me due to the busy roads and limited parking availability." – Letter 1

"Patients are encouraged to visit the pharmacy for non-essential services to reduce the strain on local GPs, however the nearest pharmacies are over a mile away and at peak times can take a 30/40 minute car journey." – Letter 5

5.1.12 It is very clear that a pharmacy at the proposed site would alleviate many of these issues, providing patients with reasonable choice and better access to a pharmacy.

5.1.13 Further information on the emails/letters can be found below in our reply to Davina Pharmacy. We feel that the experiences of local residents combined with the information provided throughout our previous correspondence shows an abundance of evidence that patients do not currently have reasonable choice to pharmaceutical provision.

Davina Pharmacy

5.1.14 The Committee will be aware that part of the NHS Long Term Plan is to integrate care systems, bringing together health partners to coordinate care locally. Much of this local integration is having health providers located together within communities, pharmacies and GPs can support each other and make services more accessible to local residents. We highlight that Dr [A] of the Boothstown Medical Centre has written a letter of support for the pharmacy, further demonstrating the better access a pharmacy would provide for local patients - included in Appendix B [see Appendix H for Committee].

5.1.15 We do not understand how the points raised around remote consultations by Davina Pharmacy are particularly relevant, as not all services can be done this way. The Committee will be aware that pharmacies are not just limited to dispensing prescriptions but are increasingly involved in clinical offerings such as Pharmacy First or Hypertension.

5.1.16 The Wigan PNA is very much cognizant of the importance of the proximity of pharmaceutical provision to GP practices, and highlights that "98% of GPs have a pharmacy within 1km" (Wigan PNA 2022-2025, pg.56). We reiterate that Boothstown Medical Centre is within the 2% of GP Practices without a pharmacy within 1km, despite Mosley Common being one of the most densely populated areas in the entire Health and Wellbeing Board – it is clear that local residents do not have sufficient access to pharmaceutical provision.

5.1.17 We do not agree with the statement that having four pharmacies within 1.5 miles of the proposed location constitutes evidence that patients have reasonable choice, given that the closest of these pharmacies is 1.1 miles away. We reiterate that distance itself is a barrier to access. This is especially pertinent when considering the viability of the journeys required to access these pharmacies, which we have already outlined above and will also be discussed later in this section.

5.1.18 In previous correspondence, Cohens stated that they had no complaints from patients, it was for this reason that reviews were provided as evidence this claim was false. The reviews shown were the most recent at the time, thus selecting the recent views cannot be considered cherry picking as they are the most relevant to the current situation.

5.1.19 Representations from Davina Pharmacy have suggested that the higher-than-average number of residents with bad or very bad health is of little relevance for patients who are able to drive to a pharmacy. We cannot understand how this conclusion was drawn. We submit that residents with bad/very bad health may not be in a position to drive in the first place and should not be forced to rely on a car for access to a pharmacy. Many of these patients will have important medication that may need to be accessed in urgent situations, thus having a pharmacy within close walking distance is more appropriate than being forced to drive and navigate busy roads with traffic. The issues of traffic will be discussed further in this section; however, we have provided a few quotes from the letters received below to demonstrate why reliance on car ownership is not sufficient:

"We both have health needs that require monthly prescriptions and can't always get in to Tyldesley to collect them on time due to the traffic congestion" – Email 7

"if we get a prescription we then have to drive to Ellenbrook Pharmacy to collect any medication. This isn't within walking distance as we have a disabled daughter and to drive can take 30 minutes in traffic." – Email 10

"Our doctors is based at Parr Bridge and with the amount of traffic getting to Tyldsley to pick our prescription up is a nightmare!" – Email 41

5.1.20 These quotes provide evidence that residents are currently forced to utilise their cars to attend a pharmacy due to the distances being too far to walk, but while these journeys may seem a relatively short drive, in reality they are time-consuming and difficult. We submit that this does not constitute sufficient access, and that a pharmacy at the proposed site would provide reasonable choice and better access to a pharmacy.

5.1.21 Representations from Davina Pharmacy also state that our demographic data evidencing a higher than- average number of people aged 65 and over, is "nothing more than a statement of fact, without direct correlation to the regulatory tests". The Committee will be aware that residents aged 65 and over fall under the category of patients with protected characteristics. We reiterate that these patients require better access to a pharmacy as a desirable consideration under Regulation 18(2)(b)(ii). We do not understand why this has been questioned considering it directly relates to the regulatory tests.

5.1.22 We also submit that the Parr Bridge retail park is considered a central location within Mosley Common. With new housing being completed to the north and east of the proposed site (100 already completed to the

east), and current housing located primarily to the north, west and south, the retail park is clearly central to Mosley Common. In fact, this is shared with the views of local residents from the letters received, who refer to the Retail Park as a centre in the community, and many make references to its accessibility:

"The parking however at Parr Bridge always has spaces and is easily accessed after visiting the GP surgery and health centre" – Email 10

"we use parr bridge only for all our other daily amenities. Doctors , grocery shop, fitness centre, pet care. All provided in the local area of Mosley common parr bridge" – Email 11

"If there is a pharmacy setup in the Parr Bridge, it would be a perfect arrangement. There is a carpark and supermarket in the location. We could shop the articles of daily use, foods and collect the prescriptions in one visit, in order to save time" – Email 16

"Here in Mosley common we have par bridge good for other things but still have to go far by bus or uber for pharmacy or just hope to be better soon. It would be great for our shopping centre to have a pharmacy" – Email 18

"I believe now is the right time for a pharmacy in the area as there are so many new houses around the area. Par Bridge is our shopping hub and convenient to us." – Email 18

"parr Bridge is a good location - as it will be a walking distance, central to the community, near other services, etc. it has become our local shopping, we have GPs , the gym, supermarkets kindergarten for kids and other convenient shops for your day to day only missing services is a pharmacy." – Email 18

"Parr Bridge Retail Park, with its existing GP surgery and nursery, is an ideal location. A pharmacy would complement these services and help establish a more complete health hub for the community." – Email 23

"With the development of other shops/services on the proposed site, it has become more of a popular hub so a pharmacy needs to be added next for the local community!" – Email 43

"With continued expansion and more homes being built in the area, I believe this is the right time to establish a new pharmacy in Parr Bridge. It would greatly benefit the local community by providing accessible healthcare services and easing pressure on nearby facilities." – Letter 1

"Since the new development of shops and other businesses at Parr Bridge, we have found our lives much easier. We are able to walk albeit slowly to Parr Bridge and avail ourselves of the facilities there." – Letter 4

"Parr Bridge Retail Park already has a large footfall due to the existing businesses which include a supermarket, Starbucks coffee shop,

Sandwich bar, charity shop, Vets surgery, gymnasium and children's nursery." – Letter 5

5.1.23 Davina Pharmacy's representations also highlight that nobody lives in the retail park. This is an obvious statement and at no point have we suggested this in our correspondence. However, it is clear that many residents frequently utilise the retail park. We note that the nearest housing estate is located less than 100 metres away, and, as undisputed in previous correspondence, the surrounding area is densely populated.

5.1.24 It is also stated that the journeys to alternative pharmacies are less than 5 minutes most of the time, however, there are many examples of residents that experience frequent journeys of more than 30 minutes, with heavy congestion in the area especially towards Tyldesley. We include some quotes from the letters received that mention these journeys below, which give insight into experiences patients are currently facing:

"Currently we have to travel into Tyldesley and this can often be a 30 to 45 minute round trip due to the sheer volume of traffic and it's getting worse" – Email 2

"pharmacies in Tyldesley are difficult to get to with the high level of traffic" – Email 5

"With the increase in housebuilding to the area and only one main road throughout the village into Tyldesley due to the continuous traffic congestion it can take 20 to drive the short journey" – Email 5

"it would be nice to have a local pharmacy I don't have to drive to. Especially in the traffic, getting to Ellenbrook or Boothstown is difficult in peak times when busy family and work lives make time precious." – Email 6

"We both have health needs that require monthly prescriptions and can't always get in to Tyldesley to collect them on time due to the traffic congestion" – Email 7

"The closest pharmacy is located in Boothstown or Tyldesley which, in distance is not far but with traffic congestion around the area a 5 minute car journey turns into 20mins or more" – Email 8

"if we get a prescription we then have to drive to Ellenbrook Pharmacy to collect any medication. This isn't within walking distance as we have a disabled daughter and to drive can take 30 minutes in traffic." – Email 10

"Heavy traffic means it takes a long time to reach other pharmacies" – Email 11

"It's in Boothstown, it's not close enough to walk there. There is so much traffic on the road. Public transport is an issue the bus is hourly and

tragic too much. I don't drive sometimes take an uber. It's inconvenient." – Email 18

"As everyone in this area will know, the surrounding roads are usually very busy so the less cars on the road for short journeys the better" – Email 27

"For those of us that live at the east end of Tyldesley it can often take 1/2 hour to get up to the town due to the roads being gridlocked...and its getting worse.....whereas a short 10 minutes walk to Parr Bridge would be ideal" – Email 28

"Our doctors is based at Parr Bridge and with the amount of traffic getting to Tyldsley to pick our prescription up is a nightmare!" – Email 41

"This has led to increased traffic and a growing population, many of whom will require access to pharmaceutical services and healthcare advice." – Letter 1

"Currently, the nearest pharmacy is in Boothstown. However, this location is not convenient for me due to the busy roads and limited parking availability." – Letter 1

"We feel that soon it will be nigh on impossible to either get to Tyldesley or indeed out of Tyldesley via the exit to the A580 at Mosely Common" – Letter 4

"Mosley Common is undergoing significant residential and commercial expansion, with over 1,000 further homes expected in the near future. This rapid development has led to increased footfall, traffic congestion, and demand on local infrastructure, yet pharmaceutical services have not kept pace." – Letter 5

"Patients are encouraged to visit the pharmacy for non-essential services to reduce the strain on local GPs, however the nearest pharmacies are over a mile away and at peak times can take a 30/40 minute car journey." – Letter 5

5.1.25 These quotes all demonstrate the strenuous journey that patients must currently undertake to access their nearest pharmacy, with multiple residents stating they would be able to access by foot at the proposed site. This demonstrates that reasonable choice and better access that would be provided to local residents should this application be granted.

Geography

5.1.26 In their representation, Davina Pharmacy again take issue with the arbitrary marker provided in our client's application. While we understand that not all residents will start their journey at the proposed site, it is impractical to assess patient journeys from every single household. Some patients will have journeys that are longer, and some shorter than detailed in our client's original application.

5.1.27 In fact, the journey to the closest pharmacy from the proposed site is shorter than the journey from the residential areas to the North or West. We reiterate that from the evidence provided, many residents view the Parr Bridge Retail Park as central to the community, so a sensible place to evaluate journeys from.

5.1.28 Much like CPGM, Davina Pharmacy question the 1km parameter used within the PNA and state that it was not meant as a criterion. We wholly disagree with this assertion and note that the 1km parameter is very explicitly detailed within the PNA.

5.1.29 On multiple occasions Davina Pharmacy comment that the proposed site is on the 'very edge' of the residential area, again we reiterate that this is still a central point for the community as the letters detail. It is notable that the area to the North and East of the proposed site is the land to be developed detailed within the Mosley Common Master Plan and will satisfy the defendant's obsession for a 'geographical centrality'.

5.1.30 An image depicting these plans has been provided below [see Appendix F], with the red star representing the proposed site.

5.1.31 It is clear from this site plan that the Parr Bridge Retail Park also provides geographical centrality for local populations, as well as the already established communal centrality.

Housing Developments & 2025 Draft PNA

5.1.32 We have previously outlined the housing developments in prior correspondence, but now provide additional evidence of these developments in Appendix C [Appendix I for Committee]. While we understand that the Master Plan is still an ongoing development project, the land has been purchased by Kellen Homes and contractors are expected to begin construction on Phase 2 later this year. Funding has also been put aside as part of an agreement with developers in the area to be put towards local infrastructure and facilities.

5.1.33 We uphold that satellite images are an effective way to properly visualise developments and provide an understanding of their progress, so are unsure why Davina Pharmacy take issue with this.

Deprivation

5.1.34 Comments regarding the bad/very bad health and out-of-date demographics have been previously addressed in response to CPGM. We reiterate that Mosley Common contains areas that fall into the top 20% most deprived nationally, therefore the suggestion that they could simply purchase a "7 day, 28 day and annual bus ticket" is wilfully ignorant and dismissive.

Amenities

5.1.35 The argument that the supermarket is the only amenity able to meet residents' needs is incorrect.

5.1.36 There are many other amenities that residents would access including a gym, Starbucks, nursery/preschool, and a charity shop. The importance of the Lidl Supermarket cannot be understated, it is the largest supermarket in the local area, and we submit that many residents from Mosley Common and its surrounding areas would utilise the site for their shopping. The importance of the retail park was also felt by the local community throughout their supporting emails and letters. Thus, contrary to the opinion of Davina Pharmacy, some key quotes have been provided below to demonstrate that the retail park meets the needs of the local residents;

"The Parr Bridge Retail Park is flat, so my partner is able to access all areas of the retail park (he is unable to climb stairs and inclines) there is also plenty of car parking available. There is a GP practice as well as a supermarket, a few independents shops, a gym and a children's nursery. The area provides all amenities except for a much-needed pharmacy." – Email 5

"The parking however at Parr Bridge always has spaces and is easily accessed after visiting the GP surgery and health centre" – Email 10

"we use parr bridge only for all our other daily amenities. Doctors , grocery shop, fitness centre, pet care. All provided in the local area of Mosley common parr bridge" – Email 11

"If there is a pharmacy setup in the Parr Bridge, it would be a perfect arrangement. There is a carpark and supermarket in the location. We could shop the articles of daily use, foods and collect the prescriptions in one visit, in order to save time" – Email 16

"Here in Mosley common we have par bridge good for other things but still have to go far by bus or uber for pharmacy or just hope to be better soon. It would be great for our shopping centre to have a pharmacy" – Email 18

"I believe now is the right time for a pharmacy in the area as there are so many new houses around the area. Par Bridge is our shopping hub and convenient to us." – Email 18

"parr Bridge is a good location - as it will be a walking distance, central to the community, near other services, etc. it has become our local shopping, we have GPs , the gym, supermarkets kindergarten for kids and other convenient shops for your day to day only missing services is a pharmacy." – Email 18

"Parr Bridge Retail Park, with its existing GP surgery and nursery, is an ideal location. A pharmacy would complement these services and help establish a more complete health hub for the community." – Email 23

"it is ridiculous that we do not have a local chemist we have a supermarket, takeaways, vets, Doctors, but no pharmacy!" – Email 35

"our GPs Surgery is in Parr Bridge. We have a nice little shopping centre opposite the health centre but no pharmacy" – Email 40

"With the development of other shops/services on the proposed site, it has become more of a popular hub so a pharmacy needs to be added next for the local community!" – Email 43

"With continued expansion and more homes being built in the area, I believe this is the right time to establish a new pharmacy in Parr Bridge. It would greatly benefit the local community by providing accessible healthcare services and easing pressure on nearby facilities." – Letter 1

"Since the new development of shops and other businesses at Parr Bridge, we have found our lives much easier. We are able to walk albeit slowly to Parr Bridge and avail ourselves of the facilities there." – Letter 4

"Parr Bridge Retail Park already has a large footfall due to the existing businesses which include a supermarket, Starbucks coffee shop, Sandwich bar, charity shop, Vets surgery, gymnasium and children's nursery." – Letter 5

5.1.37 These quotes show how fundamental the Parr Bridge Retail Park is for local residents, with multiple stating that the only amenity missing is a pharmacy. We highlight that Mosley Common also has a variety of other amenities within its residential areas as highlighted by Davina Pharmacy, including schools and an InPost Locker. Residents of Mosley Common have good access to amenities within their locality and therefore should not be forced to leave the area to access a pharmacy, suggestions that they could utilise a pharmacy in Walkden located over 2.3 miles away are not representative of reasonable choice at all.

5.1.38 Finally, Davina Pharmacy brings to attention that there has been no evidence from local residents and that all arguments are based on maps and assumptions. The Committee will note that there is not a need as such to provide evidence from local residents, and determinations can be made based on facts and data, however our client has collected evidence of patient experiences in this case. We note that some of these have already been included, and urge the committee to read these emails in full. Responses from all local residents can be found in Appendix A [Appendix G for Committee], and responses from local representatives can be found in Appendix B [Appendix H for Committee].

5.1.39 For the benefit of the Committee, we also draw attention to a select few emails below:

5.1.40 Cllr Marshall (Letter 5) who is also a local resident, writes:

"I am writing to express my full support of [AKS's] application to open a pharmacy located at Parr Bridge Retail Park, Mosley Common, M29 8RZ.

I am offering my support not only as an Elected Member for The Tyldesley and Mosley Common Ward but also as a patient at Parr Bridge Health Centre (formally Boothstown Medical Centre, situated at

239 Mosley Common Rd, Boothstown) and I wish to highlight the critical role it will play in the health and well-being of our community.

Parr Bridge Health Centre currently has 8000 registered patients, and this figure is rising month on month due to the continuous development in the area.

Mosley Common is undergoing significant residential and commercial expansion, with over 1,000 further homes expected in the near future. This rapid development has led to increased footfall, traffic congestion, and demand on local infrastructure, yet pharmaceutical services have not kept pace. While Mosley Common has a GP surgery, there is no local pharmacy to serve residents' needs. The nearest pharmacies are over a mile away, with the closest being Peak Pharmacy (1.1 miles). These distances may appear manageable on paper, but they are not in practice, especially for residents with disabilities and additional needs, parents with young children, the elderly, and those without private transport. Having a trusted local pharmacy is more than a convenience; it's a lifeline. The presence of a pharmacy will enhance the overall health infrastructure of our community and will reduce pressure on GP services. Patients are encouraged to visit the pharmacy for non-essential services to reduce the strain on local GPs, however the nearest pharmacies are over a mile away and at peak times can take a 30/40 minute car journey. Mosley Common has a large social housing estate with accommodation for the elderly and disabled residents most of whom struggle with infrequent public transport. The pharmacy will provide vital services not only prescription services, but also valuable healthcare advice, and over-the-counter products that many in our area rely on in particular Primary Health care, minor ailments, emergency contraception, smoking cessation and much much more….

Parr Bridge Retail Park already has a large footfall due to the existing businesses which include a supermarket, Starbucks coffee shop, Sandwich bar, charity shop, Vets surgery, gymnasium and children's nursery.

The contribution to our community cannot be overstated, and I believe they will continue to be an invaluable asset for years to come..

Therefore, I strongly support Mr [S's] application."

5.1.41 Cllr Marshall wrote in support not only as a representative of her community, but also as a resident and patient of the Parr Bridge Health Centre. She highlights the current distance to a pharmacy being 1.1 miles, the difficulty the journey poses, and describes a pharmacy at the proposed site as a "lifeline". [J] also brings attention to the 30/40-minute car journeys and infrequent public transport. Then finishes by describing the value of Parr Bridge Retail Park to the community, both now and going into the future.

5.1.42 [L] (Email 5) who is a carer for her partner writes:

"My family and I are residents in Mosley Common. I am a carer for my partner who has spinal issues and chronic pain. We also have family

members in Mosley Common who suffer from a number of health issues including blood pressure problems, gastroesophageal problems, heart failure, cancer and severe allergies, all of whom take regular medications.

I believe you are looking in to opening a pharmacy at our local GP practice, Boothstown Medical Centre at Parr Bridge Health Centre. This would be of tremendous help for us as we currently have to travel into Tyldesley or Astley to visit a local pharmacy to collect prescriptions, the pharmacy in Astley is only open Monday to Friday and the pharmacies in Tyldesley are difficult to get to with the high level of traffic. With the increase in housebuilding to the area and only one main road throughout the village into Tyldesley due to the continuous traffic congestion it can take 20 to drive the short journey. My partner, with spinal issues, is unable to sit on the instruction of his medical team, for more than 20minutes therefore finds it very difficult to make the journey to collect any prescriptions he requires and has to rely on other people. If there was a pharmacy attached to his GP practice, Boothstown Medical Centre, this would be perfect.

The Parr Bridge Retail Park is flat, so my partner is able to access all areas of the retail park (he is unable to climb stairs and inclines) there is also plenty of car parking available. There is a GP practice as well as a supermarket, a few independents shops, a gym and a children's nursery. The area provides all amenities except for a much-needed pharmacy.

The addition of a local pharmacy may help ease the demand on the GP, it is very difficult to get and appointments and if there was a pharmacy that could help with minor ailments this may help reduce the demand for appointments at the GP practice. A pharmacy with extended hours that is open on a weekend also would really benefit the working community.

The area is continuing to grow with recent planning permission for over a thousand houses as well as industrial units a short distance away so I would think that a lot of local residents as well as workers would use the pharmacy.

Thank you for helping the community by applying to open a pharmacy."

5.1.43 [L]'s partner and various family members suffer from various health issues and consequently take regular medications, therefore requiring frequent access to a pharmacy. Her husband is forced to rely on other people to get his medication as he is unable to sit for more than 20 minutes as per medical instructions, yet due to traffic the short journeys can easily take this long. Her husband has therefore lost his independence, and is currently unable to attend a pharmacy himself, this is not representative of reasonable choice or good access. However, he is able to access all amenities at Parr Bridge due to the areas flat nature, it is felt that the only thing missing is a pharmacy which he would be able to attend himself, regaining his independence. It would

also help to reduce the pressure on the GP practice, which [L][states has high demand.

5.1.44 [C] (Email 10) who has a disabled daughter writes:

"We heard there has been some discussion in regard to a pharmacy at Mosley Common and I wanted to write in support of this.

We live close to Parr Bridge Retail Park where there is a doctors surgery and a vets with other shopping retail stores. This for us is in walking distance and where we shop daily. Having a doctor's there means if we get a prescription we then have to drive to Ellenbrook Pharmacy to collect any medication. This isn't within walking distance as we have a disabled daughter and to drive can take 30 minutes in traffic.

The new homes being built has put a huge strain on the local pharmacies and the queuing time can be up to one hour. This pharmacy at Ellenbrook also closes at lunch and the queue after lunch is out of the door. The pharmacist struggles if you need to talk to him with any illness now we are being redirected to them for certain health problems as he has so many prescriptions to dispense. This pharmacy is also closed on a weekend making it hard for those that work to collect from. The local area has new homes currently being built and there is another 1000 + homes being built on the new Great Places/Kellen homes site. This will make seeing a pharmacist and getting a prescription in any reasonable wait time impossible. It already takes up to 5 days to be dispensed.

The parking at Ellenbrook Pharmacy is so small and always full. Parking there is hard. The parking however at Parr Bridge always has spaces and is easily accessed after visiting the GP surgery and health centre.

To me it would make perfect sense that there would be a pharmacy with the Boothstown Medical Centre. We could purchase pain medications and all pharmaceutical products there as well as collection of prescribed medications. As one of our daughters is disabled, another expecting a baby and myself on life long medication it would make life so much easier for us to have a pharmacy we could walk to. Reducing congestion and costs of collecting medications. It would bring more people to the Parr Bridge Retail Park and increase spending in this local area.

We are hugely in favour of a local pharmacy in Mosley Common and would be glad to hear of one being opened there.

Thank you for reading this email."

5.1.45 [C] is unable to undertake the 30-minute walk to Ellenbrook Pharmacy as she has a disabled daughter, instead they are forced to drive, this journey can take up to 30 minutes. Being forced to drive when the preference is to walk is not representative of reasonable choice. She states that the increasing population has put strain on local services and queuing times at the pharmacy can be up to an hour. With the population increasing more in the future it is anticipated that waiting

times will become too much, a pharmacy at the proposed site would be within walkable distance and provide better access for the family's regular requirement of medication.

5.1.46 [A] (Email 23) writes:

"Thank you for your recent leaflet inviting community support for the establishment of a pharmacy in Mosley Common. I am writing to express my full support for this much needed pharmacy and to outline the reasons why I believe it would be a vital addition to our area.

I am one of many residents who have moved to Mosley Common in recent years. As you are aware, this is a rapidly growing community, according to the most recent census, over 11,000 people now call this area home. My wife and I are among them, and with my wife currently six months pregnant, we are particularly aware of the importance of accessible local healthcare services. As the population continues to increase, so too will the demand for healthcare provisions. While we are fortunate to have Boothstown Medical Centre nearby, serving residents from Boothstown and Mosley Common, there remains a clear gap in local pharmaceutical services. The closest pharmacy is located in Ellenbrook, which falls under Salford's jurisdiction rather than within Wigan Borough, or otherwise requires travelling to Tyldesley.

With hundreds of new homes already built and more in the pipeline, the case for a pharmacy within Mosley Common grows stronger by the day. Parr Bridge Retail Park, with its existing GP surgery and nursery, is an ideal location. A pharmacy would complement these services and help establish a more complete health hub for the community.

There are also wider social and economic benefits to consider. A pharmacy would not only improve health outcomes and convenience for residents but also create jobs and support the local economy. It would serve as an essential, everyday service for families, the elderly, and those with ongoing medical needs.

A pharmacy in Mosley Common is necessary. I am confident that it would be welcomed and well used by the community"

5.1.47 [A] states that he is one of many new residents in recent years, emphasising the growth of the local population which he believes is now around 11,000 people. He brings attention to the many useful amenities at Parr Bridge and believes it is an ideal location for a pharmacy to compliment these services and create a "more complete health hub for the community".

5.1.48 [H] (Email 10) who has hypertension writes:

"Good morning. I hope this email finds you well. I am writing to express my support for the proposed community pharmacy in Mosley Common.

My husband and I are now living on Weavers Close. My husband is a retired firefighter and I am now a home caretaker. Both of us have hypertension and take medicines every day. I have to apply eyedrops

daily as I have issues with my eyes, too. So, we are in need of having a local pharmacy for our daily medications.

I currently collect my medication at the Peak Pharmacy at Ellenbrook which is the closest pharmacy to me. But it takes me nearly half an hour walking there and another half an hour walking back. There is a bus 553 but it serves only once every hour during peak hours and once every 2 hours for non-peak hours.

It may be worth considering the opening of a new pharmacy in Parr Bridge Retail Park, perhaps within the Parr Bridge Health and Wellbeing Centre. It is the centre of the community and will take me just 6 minutes walking there.

Under the council development plan, about 1000 new residential houses will be built to the east and north of the retail park in the near future, thus, creating a stronger need of a local and easy to access pharmacy.

Thanks a lot for your help."

5.1.49 Both [H] and her husband have hypertension and require regular medication, she is currently forced to endure a roughly 60-minute round walk to access the nearest pharmacy in Ellenbrook.

5.1.50 Whilst she recognises that there is a bus service, it appears to be infrequent enough that it is not considered a viable option. On the other hand, a pharmacy at the proposed site could be accessed within 6 minutes of walking, helping to cater for the current residents such as [H] and her husband, but also the new developments.

5.1.51 For the benefit of the Committee, we have also categorised the comments received in the email/letters, so they can understand the scale of the problems within Mosley Common. These categories constitute:

5.1.51.1 Groups with protected characteristics/medical issues

5.1.51.2 New developments in the area

5.1.51.3 Mosley Common's growing population

5.1.51.4 The journeys patients currently undertake (By foot, car, and bus)

5.1.51.5 Accessing current provision

5.1.51.6 Comments on the Medical Centre

5.1.51.7 Comments on Parr Bridge Retail Park

5.1.51.8Current issues with capacity

Protected Characteristics/Medical Issues:

5.1.52 Mosley Common has a large population of residents with protected characteristics and/or reliant on pharmaceutical services, these residents require better access to a pharmacy and are directly considered under the regulations. Most of these residents either face great difficulty currently accessing a pharmacy or are forced to rely on others to collect prescriptions for them. These residents are therefore not able to make full use of the services that pharmacies can offer, which does not represent reasonable choice or sufficient access.

"I am diabetic and my wife is pre diabetic and my eldest daughter has recently had surgery as well as suffering from asthma so a local pharmacy would be so helpful" – Email 2

"I am often directed to boots in Walkden and with a small baby it's a trip I'd rather not be taking" – Email 3

"I am a carer for my partner who has spinal issues and chronic pain. We also have family members in Mosley Common who suffer from a number of health issues including blood pressure problems, gastroesophageal problems, heart failure, cancer and severe allergies, all of whom take regular medications." – Email 5

"My partner, with spinal issues, is unable to sit on the instruction of his medical team, for more than 20 minutes therefore finds it very difficult to make the journey to collect any prescriptions he requires and has to rely on other people. If there was a pharmacy attached to his GP practice, Boothstown Medical Centre, this would be perfect." – Email 5

"The area is home to a lot of families with young children" – Email 8

"With a young child in the family the need for an easily accessible pharmacy I can walk to would help greatly with seeking help when needed." – Email 8

"if we get a prescription we then have to drive to Ellenbrook Pharmacy to collect any medication. This isn't within walking distance as we have a disabled daughter and to drive can take 30 minutes in traffic." – Email 10

"As one of our daughters is disabled, another expecting a baby and myself on life long medication it would make life so much easier for us to have a pharmacy we could walk to" – Email 10

"All 5 members have medical conditions from diabetes, iron deficiency, high blood pressure. This is a monthly yet sometimes weekly need for medication being prescribed and collected." – Email 11

"The area is home to a lot of families with young children and with significant housing development taking place, there is only going to be an even higher demand for local amenities." – Email 13

"My husband is a retired firefighter and I am now a home caretaker. Both of us have hypertension and take medicines every day. I have to

apply eyedrops daily as I have issues with my eyes, too. So, we are in need of having a local pharmacy for our daily medications" – Email 14

"There is no pharmacy in the Mosley Common. If there is a pharmacy nearby, it would provide convenience access to the residents especially for the elderly" – Email 16

"Myself is a diabetic and need to collect regular prescriptions monthly" – Email 16

"Because of access problems I decided to use an online service which was, at first very reliable. Recently I have found that the time taken to a, process my request and b, actually deliver my med's has significantly increase with at times some being not in stock for several days." – Email 19

"Myself and my wife moved into supported living in the local area approximately 3 years ago. Whilst we find that our healthcare needs are adequately covered by the opening of the surgery at Parr Bridge health centre, the addition of a pharmacy to the local area would be more than welcome." – Email 19

"Whilst my wife is generally in good health, I personally suffer from hypertension and have in the past been diagnosed with deep vein thrombosis and take daily blood thinning medication." – Email 19

"My wife and I are among them, and with my wife currently six months pregnant, we are particularly aware of the importance of accessible local healthcare services" – Email 23

"I have a 3 year old and 4 year old each who have needed pharmacy help for illnesses like ear infections in the last year" – Email 25

"It would be very much appreciated by all local people and more so the elderly people of Mosley Common to be able to walk to a local pharmacy! There are a lot of elderly people in the area, myself included and who also can't walk properly and don't drive!" – Email 30

"We would appreciate a local pharmacy in the parr bridge, we are elderly couple living close to the Gp but our nearest pharmacy is in booths town which is not convenient for us to get to" – Email 33

"Myself and my neighbours who are also patients of the local health centre and elderly in our 80 plus would be so grateful for a local pharmacy as we have to travel a distance to collect prescriptions etc from this area." – Email 36

"We are a mixed age neighbourhood with a growing population of children but also adults in their 40s and 50s with growing health problems." – Email 37

"What's the point having a doctors in brand new building with plenty of space to put a pharmacy in! It would also help the elderly." – Email 41

"I work in a hospital as a registered nurse and have a long-term medical condition that requires a regular prescription every three months" – Letter

"My wife and I are pensioners who live on Sale Lane in Tyldesley. We have a variety of health conditions (blood pressure, cholesterol) which require monthly medications to be collected" – letter 4

"The nearest pharmacies are over a mile away, with the closest being Peak Pharmacy (1.1 miles). These distances may appear manageable on paper, but they are not in practice, especially for residents with disabilities and additional needs, parents with young children, the elderly, and those without private transport" – Letter 5

"Mosley Common has a large social housing estate with accommodation for the elderly and disabled residents most of whom struggle with infrequent public transport." – Letter 5

Developments

5.1.53 Many of the responses referenced the large number of developments occurring in the locality, with some living in the new developments themselves. It is of strong opinion that a new pharmacy is needed to cater to these new developments and reduce pressure off existing services, whilst providing a much needed pharmacy to the residents of Mosley Common.

"The area has a growing number of new housing developments, bringing in even more people who will need accessible healthcare support" – Email 1

"With new homes, businesses, and local services opening regularly, Mosley Common is fast becoming a thriving hub. A pharmacy would not only serve residents but also support local healthcare infrastructure" – Email 1

"With more developments in the pipeline, demand for local health services will only increase. Establishing a pharmacy now will ensure we're prepared for the future needs of our community." – Email 1

"Mosley common is ever expanding with lots of new houses and the plans for 1,100 more so why would a pharmacy not be a good idea" – Email 2

"with significant housing development taking place, there is only going to be an even higher demand for local amenities" – Email 8

"I'm all for a local pharmacy as with so many new houses we are desperately needing more provision and services" – Email 9

"The new homes being built has put a huge strain on the local pharmacies and the queuing time can be up to one hour" – Email 10

"Mosley Common Is a Growing Hub of Local Businesses and Services so it should have all services at convenience" – Email 12

"The area is home to a lot of families with young children and with significant housing development taking place, there is only going to be an even higher demand for local amenities." – Email 13

"Also, more residence houses are under construction (e.g. Trilogy) in the Mosley Common, the new pharmacy should be more beneficial to the surrounding residences and serve the needs of the increasing population." – Email 16

"With hundreds of new homes already built and more in the pipeline, the case for a pharmacy within Mosley Common grows stronger by the day" – Email 23

"Due to rapid housing development we suffer from lack of appropriate NHS GP capacity and a local pharmacy services could partially bridge that gap." – Email 37

"Part bridge would be perfect and convenient to a lot of people, they are building more and more houses but not enough pharmacies nearby" – Email 39

"With the development of other shops/services on the proposed site, it has become more of a popular hub so a pharmacy needs to be added next for the local community!" – Email 43

"Over the past few years, there has been significant housing development in the Mosley Common area." – Letter 1

"With continued expansion and more homes being built in the area, I believe this is the right time to establish a new pharmacy in Parr Bridge. It would greatly benefit the local community by providing accessible healthcare services and easing pressure on nearby facilities." – Letter 1

"We are also aware of the number of new houses which have been and are to be built in and around the area of Tyldesley/Moseley Common" – Letter 4

"Parr Bridge Health Centre currently has 8000 registered patients, and this figure is rising month on month due to the continuous development in the area." – Letter 5

"Mosley Common is undergoing significant residential and commercial expansion, with over 1,000 further homes expected in the near future. This rapid development has led to increased footfall, traffic congestion, and demand on local infrastructure, yet pharmaceutical services have not kept pace." – Letter 5

Population Growth

5.1.54 Insights below mirror that of the developments section above but place more emphasis on the growing number of residents, which consequently has increased the number of people with protected characteristics or limited mobility. Again, a pharmacy at the proposed location will help cater to both the new and existing residents.

"The area is continuing to grow with recent planning permission for over a thousand houses as well as industrial units a short distance away" – Email 5

"Our doctors is at Parr bridge and to which a much needed pharmacy due to the fast growing community is and would be highly recommended for all residents" – Email 11

"I am very much in favour for there to be a closer pharmacy that helps us get the help we need. Now more than ever with the area very quickly becoming more and more popular" – Email 15

"The area is expanding so much so this new Pharmacy is definitely needed especially if it can ease the waiting times to see a Dr with mild symptoms." – Email 20

"Mosley Common is an area that has expanded exponentially over the last 5 years, with a large demographic, including older adults and younger families." – Email 21

"The growth within the area clearly highlights the need for increased services for our population, including medical support and a pharmacy. Our nearest pharmacy is quite a distance, and this is a particular issue for some of our residents such as the elderly and those who don't drive" – Email 21

"I am one of many residents who have moved to Mosley Common in recent years. As you are aware, this is a rapidly growing community, according to the most recent census, over 11,000 people now call this area home" – Email 23

"As the population continues to increase, so too will the demand for healthcare provisions" – Email 23

"We moved to this area two years ago as it was affordable and accessible and I know proposed new housing will bring others in similar positions" – Email 25

"Mosley Common area is expanding rapidly and although houses are being built, other necessities are being ignored." – Email 29

"We are a mixed age neighbourhood with a growing population of children but also adults in their 40s and 50s with growing health problems." – Email 37

"The area is expanding fast with a growing community who need a pharmacy in their area" - Email 40

"This has led to increased traffic and a growing population, many of whom will require access to pharmaceutical services and healthcare advice." – Letter 1

"With ongoing population growth, the proposed pharmacy will be well-positioned to support these groups by offering easy access to medicines, health advice, and essential clinical services, particularly for those unable to travel far." – Letter 3

"Local planning documents outline imminent housing developments and regeneration projects in the area, which will likely increase population density and demand for primary healthcare services. The proposed pharmacy is well-placed to meet this growing need, ensuring sustainability and reducing future strain on other NHS providers." – Letter 3

"Parr Bridge Health Centre currently has 8000 registered patients, and this figure is rising month on month due to the continuous development in the area." – Letter 5

Current Journeys

5.1.55 It is apparent by the comments from residents that journeys to the nearest pharmacies do not equate to good access or reasonable choice. For those who are forced to access by foot they must endure a walk of around 30 minutes or longer each way. Residents have commented on the infrequent or unreliable buses, which do not seem to be a viable option for residents to access a pharmacy. This leaves most residents with no choice but to access by car, which may seem like a short journey but in reality, is anywhere between 20-45 minutes each way due to the congestion.

5.1.56 There are also issues mentioned regarding parking at various sites.

5.1.57 By Foot

"The closest pharmacies are in neighbouring towns like Walkden or Tyldesley. These aren't easily accessible on foot and often require car journeys or public transport" – Email 1

"Nearest pharmacy not within walking distance" – Email 17

"Here in Mosley common we have par bridge good for other things but still have to go far by bus or uber for pharmacy or just hope to be better soon. It would be great for our shopping centre to have a pharmacy" – Email 18

"It's in Boothstown, it's not close enough to walk there. There is so much traffic on the road. Public transport is an issue the bus is hourly and tragic too much. I don't drive sometimes take an uber. It's inconvenient." – Email 18

"Without a car it has been hard to get to the pharmacies in Boothstown and Ellenbrook with poorly children" – Email 25

"The nearest pharmacy is Ellenbrook / Boothstown. This is a very long walk for us nondrivers."- Email 29

"It would be very much appreciated by all local people and more so the elderly people of Mosley Common to be able to walk to a local pharmacy! There are a lot of elderly people in the area, myself included and who also can't walk properly and don't drive!" – Email 30

"It means people who live in the community have to travel to a chemist and if you have no transport, it will mean walking, which can sometimes be a distance to Ellenbrook or Boothstown." – Email 35

"There isn't enough provision currently in the area, the nearest pharmacy is too far away, especially for the elderly and those of low socioeconomic background who aren't able to afford a car" – Email 43

5.1.58 By Bus

"Not everyone in our area has access to reliable transport. A local pharmacy would remove a significant barrier for lower-income or elderly residents, making vital services more equitable." – Email 1

"There is a bus 553 but it serves only once every hour during peak hours and once every 2 hours for non-peak hours." – Email 14

"I currently collect my medication at the Peak Pharmacy at Ellenbrook which is the closest pharmacy to me. But it takes me nearly half an hour walking there and another half an hour walking back. There is a bus 553 but it serves only once every hour during peak hours and once every 2 hours for non-peak hours." – Email 14

"It's in Boothstown, it's not close enough to walk there. There is so much traffic on the road. Public transport is an issue the bus is hourly and tragic too much. I don't drive sometimes take a n uber. It's inconvenient." – Email 18

"The area has small roads but population has increased so much. Going to other places is far and not easy to travel due to traffic and bus connections not great." – Email 18

"I have lived in Mosley Common for 30+ years. We have never had a pharmacy in the area and it has always been a long trek to the nearest one." – Email 22

"Without a car it has been hard to get to the pharmacies in Boothstown and Ellenbrook with poorly children" – Email 25

"Our nearest pharmacy is in Tyldesley or Boothstown. We mainly use public transport which can be unreliable on occasion to collect our scripts." – Letter 4

"Mosley Common has a large social housing estate with accommodation for the elderly and disabled residents most of whom struggle with infrequent public transport." – Letter 5

5.1.59 By Car

"Currently we have to travel into Tyldesley and this can often be a 30 to 45 minute round trip due to the sheer volume of traffic and it's getting worse" – Email 2

"With the increase in housebuilding to the area and only one main road throughout the village into Tyldesley due to the continuous traffic congestion it can take 20 to drive the short journey" – Email 5

"it would be nice to have a local pharmacy I don't have to drive to. Especially in the traffic, getting to Ellenbrook or Boothstown is difficult in peak times when busy family and work lives make time precious." – Email 6

"We both have health needs that require monthly prescriptions and can't always get in to Tyldesley to collect them on time due to the traffic congestion" – Email 7

"The closest pharmacy is located in Boothstown or Tyldesley which, in distance is not far but with traffic congestion around the area a 5 minute car journey turns into 20mins or more" – Email 8

"if we get a prescription we then have to drive to Ellenbrook Pharmacy to collect any medication. This isn't within walking distance as we have a disabled daughter and to drive can take 30 minutes in traffic." – Email 10

"Heavy traffic means it takes a long time to reach other pharmacies" – Email 11

"I live nearby & currently have to drive to nearest pharmacy in ellenbrook or tyldesley which is inconvenient" – Email 12

"The area has small roads but population has increased so much. Going to other places is far and not easy to travel due to traffic and bus connections not great." – Email 18

"I currently have to travel and the parking is very limited." – Email 20

"As everyone in this area will know, the surrounding roads are usually very busy so the less cars on the road for short journeys the better" – Email 27

"For those of us that live at the east end of Tyldesley it can often take 1/2 hour to get up to the town due to the roads being gridlocked...and its getting worse.....whereas a short 10 minutes walk to Parr Bridge would be ideal" – Email 28

"We are in real need of a local pharmacy rather than having to travel into Tyldesley or Walkden...Tyldesley also has parking issues. Lots of parking at Parr Bridge." – Email 34

"Our doctors is based at Parr Bridge and with the amount of traffic getting to Tyldsley to pick our prescription up is a nightmare!" – Email 41

"This has led to increased traffic and a growing population, many of whom will require access to pharmaceutical services and healthcare advice." – Letter 1

"Currently, the nearest pharmacy is in Boothstown. However, this location is not convenient for me due to the busy roads and limited parking availability." – Letter 1

"Patients are encouraged to visit the pharmacy for non-essential services to reduce the strain on local GPs, however the nearest pharmacies are over a mile away and at peak times can take a 30/40 minute car journey." – Letter 5

Current Provision (Access)

5.1.60 This section highlights that local residents are being forced to leave Mosley Common and access a pharmacy in the surrounding towns. These journeys do not represent sufficient access or reasonable choice. Difficulties in accessing a pharmacy could deter patients from accessing services at all, such as Minor Ailments and Pharmacy First, which may cause health conditions to worsen.

"Currently, many of us—especially the elderly, young families, and those with mobility issues—are forced to travel to neighbouring towns for essential prescriptions and health advice. This is both inconvenient and, for some, simply not feasible." – Email 1

"I am often directed to boots in Walkden and with a small baby it's a trip I'd rather not be taking" – Email 3

"we currently have to travel into Tyldesley or Astley to visit a local pharmacy to collect prescriptions" – Email 5

"We both have health needs that require monthly prescriptions and can't always get in to Tyldesley to collect them on time due to the traffic congestion" – Email 7

"Nearest pharmacy not within walking distance" – Email 17

"It's a challenge to go to other pharmacies they are far, and I live alone in times of emergency I need somewhere close to collect or buy medication" – Email 18

"When i attend my local doctors, which is now at Parrbridge, It is still quite a distance to get to the nearest pharmacy, which can be found in Boothstown or Ellenbrook." – Email 22

"The nearest is either Tyldesley or Astley which is not convenient if you don't have transport when you live in Mosley Common." – Email 32

"We are in real need of a local pharmacy rather than having to travel into Tyldesley or Walkden...Tyldesley also has parking issues. Lots of parking at Parr Bridge." – Email 34

"It means people who live in the community have to travel to a chemist and if you have no transport, it will mean walking, which can sometimes be a distance to Ellenbrook or Boothstown." – Email 35

"Myself and my neighbours who are also patients of the local health centre and elderly in our 80 plus would be so grateful for a local pharmacy as we have to travel a distance to collect prescriptions etc from this area." – Email 36

"Currently we rely on pharmacies away from from our area which are not always accessible or convenient" – Email 37 [sic]

"Mosley common are in urgent need of a close by pharmacy, the nearest a ellenbrook which is a fair walk , we have lots of children and elderly in Mosley common and most who can't or aren't mobile to collect from eolenbrook boothstown etc" – Email 39 [sic]

"Our nearest pharmacy is in Boothstown or Elliot St , so inconvenient." – Email 40

"There isn't enough provision currently in the area, the nearest pharmacy is too far away, especially for the elderly and those of low socioeconomic background who aren't able to afford a car" – Email 43

"Currently, the nearest pharmacy is in Boothstown. However, this location is not convenient for me due to the busy roads and limited parking availability." – Letter 1

"Our nearest pharmacy is in Tyldesley or Boothstown. We mainly use public transport which can be unreliable on occasion to collect our scripts." – Letter 4

"The nearest pharmacies are over a mile away, with the closest being Peak Pharmacy (1.1 miles). These distances may appear manageable on paper, but they are not in practice, especially for residents with disabilities and additional needs, parents with young children, the elderly, and those without private transport" – Letter 5

Medical Centre

5.1.61 Residents feel that a pharmacy located near the Medical Centre would provide better access, aligning with the goals of the PNA and the NHS Long Term Plan of having a more integrated healthcare system.

"As a resident of the area and a patient of Boothstown medical centre I have to say that I feel that this is a must for the area" – Email 2

"My partner, with spinal issues, is unable to sit on the instruction of his medical team, for more than 20minutes therefore finds it very difficult to make the journey to collect any prescriptions he requires and has to rely

on other people. If there was a pharmacy attached to his GP practice, Boothstown Medical Centre, this would be perfect." – Email 5

"The addition of a local pharmacy may help ease the demand on the GP, it is very difficult to get and appointments and if there was a pharmacy that could help with minor ailments this may help reduce the demand for appointments at the GP practice." – Email 5

"It makes logical sense for there to be a pharmacy located at/near to the wellbeing centre" – Email 8

"To me it would make perfect sense that there would be a pharmacy with the Boothstown Medical Centre. We could purchase pain medications and all pharmaceutical products there as well as collection of prescribed medications" – Email 10

"Our doctors is at Parr bridge and to which a much needed pharmacy due to the fast growing community is and would be highly recommended for all residents" – Email 11

"While we are fortunate to have Boothstown Medical Centre nearby, serving residents from Boothstown and Mosley Common, there remains a clear gap in local pharmaceutical services" – Email 23

"Having a pharmacy next to the GP practice would be most beneficial for for my family and wider neighbourhood." – Email 37 [sic]

"Yes that would be great as my doctors surgery is there, Dr [A]." – Email 38

"our GPs Surgery is in Parr Bridge. We have a nice little shopping centre opposite the health centre but no pharmacy" – Email 40

"Our doctors is based at Parr Bridge and with the amount of traffic getting to Tyldsley to pick our prescription up is a nightmare!" – Email 41

"I am emailing in support of a chemist at mosley common. One is needed for the doctors" – Email 42

"I am offering my support not only as an Elected Member for The Tyldesley and Mosley Common Ward but also as a patient at Parr Bridge Health Centre" – Letter 5

"Parr Bridge Health Centre currently has 8000 registered patients, and this figure is rising month on month due to the continuous development in the area." – Letter 5

"While Mosley Common has a GP surgery, there is no local pharmacy to serve residents' needs." – Letter 5

Retail Park

5.1.62 Parr Bridge retail park provides many if not all amenities needed by the residents, it was consistently seen throughout the responses that Parr Bridge acts as a central hub for the community and that a pharmacy here would be widely accessible to all residents.

"The Parr Bridge Retail Park is flat, so my partner is able to access all areas of the retail park (he is unable to climb stairs and inclines) there is also plenty of car parking available. There is a GP practice as well as a supermarket, a few independents shops, a gym and a children's nursery. The area provides all amenities except for a much-needed pharmacy." – Email 5

"I am happy to help support you fight for a pharmacy on Parr Bridge. It was promised originally when the first plans were made to convert the old metal works. Would be great to see this come true" – Email 6

"The parking however at Parr Bridge always has spaces and is easily accessed after visiting the GP surgery and health centre" – Email 10

"we use parr bridge only for all our other daily amenities. Doctors , grocery shop, fitness centre, pet care. All provided in the local area of Mosley common parr bridge" – Email 11

"If there is a pharmacy setup in the Parr Bridge, it would be a perfect arrangement. There is a carpark and supermarket in the location. We could shop the articles of daily use, foods and collect the prescriptions in one visit, in order to save time" – Email 16

"Here in Mosley common we have par bridge good for other things but still have to go far by bus or uber for pharmacy or just hope to be better soon. It would be great for our shopping centre to have a pharmacy" – Email 18

"I believe now is the right time for a pharmacy in the area as there are so many new houses around the area. Par Bridge is our shopping hub and convenient to us." – Email 18

"Parr Bridge is a good location - as it will be a walking distance, central to the community, near other services, etc. it has become our local shopping, we have GPs , the gym, supermarkets kindergarten for kids and other convenient shops for your day to day only missing services is a pharmacy." – Email 18

"Parr Bridge Retail Park, with its existing GP surgery and nursery, is an ideal location. A pharmacy would complement these services and help establish a more complete health hub for the community." – Email 23

"it is ridiculous that we do not have a local chemist we have a supermarket, takeaways, vets, Doctors, but no pharmacy!" – Email 35

"our GPs Surgery is in Parr Bridge. We have a nice little shopping centre opposite the health centre but no pharmacy" – Email 40

"With the development of other shops/services on the proposed site, it has become more of a popular hub so a pharmacy needs to be added next for the local community!" – Email 43

"With continued expansion and more homes being built in the area, I believe this is the right time to establish a new pharmacy in Parr Bridge. It would greatly benefit the local community by providing accessible healthcare services and easing pressure on nearby facilities." – Letter 1

"Since the new development of shops and other businesses at Parr Bridge, we have found our lives much easier. We are able to walk albeit slowly to Parr Bridge and avail ourselves of the facilities there." – Letter 4

"Parr Bridge Retail Park already has a large footfall due to the existing businesses which include a supermarket, Starbucks coffee shop, Sandwich bar, charity shop, Vets surgery, gymnasium and children's nursery." – Letter 5

Proposed Site

5.1.63 Similarly to the Parr Bridge section above, these comments highlight the benefits of the proposed location to the community. It emphasises that the pharmacy would be well utilised in connection with other amenities and visits could be integrated within residents daily lives.

"The proposed location near Boothstown Medical Centre is ideal—central, easy to access on foot, and well-connected for those with pushchairs or mobility aids." – Email 1

"My partner, with spinal issues, is unable to sit on the instruction of his medical team, for more than 20 minutes therefore finds it very difficult to make the journey to collect any prescriptions he requires and has to rely on other people. If there was a pharmacy attached to his GP practice, Boothstown Medical Centre, this would be perfect." – Email 5

"If there is a pharmacy setup in the Parr Bridge, it would be a perfect arrangement. There is a carpark and supermarket in the location. We could shop the articles of daily use, foods and collect the prescriptions in one visit, in order to save time" – Email 16

"The location is near my house and within walking distance. I can therefore walk instead of drive, so saving $ (petrol) + doing exercise + producing less CO2." – Email 16

"Here in Mosley common we have par bridge good for other things but still have to go far by bus or uber for pharmacy or just hope to be better soon. It would be great for our shopping centre to have a pharmacy" – Email 18

"It's a challenge to go to other pharmacies they are far, and I live alone in times of emergency I need somewhere close to collect or buy medication" – Email 18

5.1.64 *A new one close by will be convenient and there are many families to benefit" – Email 18*

"Parr Bridge is a good location - as it will be a walking distance, central to the community, near other services, etc. it has become our local shopping, we have GPs , the gym, supermarkets kindergarten for kids and other convenient shops for your day to day only missing services is a pharmacy." – Email 18

"The area's growth so much . There are many new housing, families moving in , increased population, etc . And more construction sites have started again for new houses." – Email 18

"I believe now is the right time for a pharmacy in the area as there are so many new houses around the area. Par Bridge is our shopping hub and convenient to us." – Email 18

"Myself and my wife moved into supported living in the local area approximately 3 years ago. Whilst we find that our healthcare needs are adequately covered by the opening of the surgery at Parr Bridge health centre, the addition of a pharmacy to the local area would be more than welcome." – Email 19

"Convenience and accessibility to our own pharmacy will in my view bring health benefits to our local population" – Email 21

"Parr Bridge Retail Park, with its existing GP surgery and nursery, is an ideal location. A pharmacy would complement these services and help establish a more complete health hub for the community." – Email 23

"We have also needed pharmacy help with elderly relatives visiting regularly. The proposed site is a short walk and would be very convenient." – Email 25

"It would be really useful and convenient to have the pharmacy on Parr Bridge as I live on the new estate behind" – Email 27

"For those of us that live at the east end of Tyldesley it can often take 1/2 hour to get up to the town due to the roads being gridlocked...and its getting worse.....whereas a short 10 minutes walk to Parr Bridge would be ideal" – Email 28

"It would be very much appreciated by all local people and more so the elderly people of Mosley Common to be able to walk to a local pharmacy! There are a lot of elderly people in the area, myself included and who also can't walk properly and don't drive!" – Email 30

"I support the plan for a new pharmacy at Parr Bridge especially now Boothstown Medical Centre has relocated to this site. Much easier than having to get to my current designated pharmacy in Tyldesley." – Email 31

"We would appreciate a local pharmacy in the parr bridge, we are elderly couple living close to the Gp but our nearest pharmacy is in booths town which is not convenient for us to get to" – Email 33

"We are in real need of a local pharmacy rather than having to travel into Tyldesley or Walkden...Tyldesley also has parking issues. Lots of parking at Parr Bridge." – Email 34

"A pharmacy at Parr Bridge should be a number one priority!" – Email 35

"Having a pharmacy next to the GP practice would be most beneficial for for my family and wider neighbourhood." – Email 37 [sic]

"Part bridge would be perfect and convenient to a lot of people, they are building more and more houses but not enough pharmacies nearby" – Email 39

"With the development of other shops/services on the proposed site, it has become more of a popular hub so a pharmacy needs to be added next for the local community!" – Email 43

"With continued expansion and more homes being built in the area, I believe this is the right time to establish a new pharmacy in Parr Bridge. It would greatly benefit the local community by providing accessible healthcare services and easing pressure on nearby facilities." – Letter 1

"A pharmacy at Parr Bridge is to our mind exactly the type of service required to support the local community" – Letter 4

"The pharmacy will provide vital services not only prescription services, but also valuable healthcare advice, and over-the-counter products that many in our area rely on in particular Primary Health care, minor ailments, emergency contraception, smoking cessation and much much more…." – Letter 5

Current Capacity Issues

5.1.65 Various comments were also made regarding the current service's inability to meet demand, with a rapidly increasing population strain has been placed both on local providers and the infrastructure in the locality. This has led to longer queues as well as frequent issues with traffic and parking. A pharmacy at the proposed site would assist in alleviating the pressure on other providers and offer better access to the residents of Mosley Common and its surrounding areas.

"The new homes being built has put a huge strain on the local pharmacies and the queuing time can be up to one hour" – Email 10

"This pharmacy at Ellenbrook also closes at lunch and the queue after lunch is out of the door. The pharmacist struggles if you need to talk to him with any illness now we are being redirected to them for certain

health problems as he has so many prescriptions to dispense" – Email 10

"It already takes up to 5 days to be dispensed." – Email 10

"The parking at Ellenbrook Pharmacy is so small and always full. Parking there is hard" – Email 10

"very difficult and sometimes can take over a week to receive our prescriptions." – Email 11

"Because of access problems I decided to use an online service which was, at first very reliable. Recently I have found that the time taken to a, process my request and b, actually deliver my med's has significantly increase with at times some being not in stock for several days." – Email 19

"The area is expanding so much so this new Pharmacy is definitely needed especially if it can ease the waiting times to see a Dr with mild symptoms." – Email 20

"We already have to wait for our medication , some times several days. With the area expanding, it will put more pressure on our nearest pharmacies, who may not be able to keep on top of the volume of people calling me." – Email 22

"As everyone in this area will know, the surrounding roads are usually very busy so the less cars on the road for short journeys the better" – Email 27

"Due to rapid housing development we suffer from lack of appropriate NHS GP capacity and a local pharmacy services could partially bridge that gap." – Email 37

Conclusion

5.1.66 We conclude that there is an overwhelming body of evidence highlighting the need for pharmaceutical services in Mosley Common. Residents currently have poor access to pharmacies, forced to endure difficult journeys to surrounding areas, despite having all other amenities needed within Mosley Common.

5.1.67 It is clear that the area has been subject to a number of large housing developments and therefore the population has increased significantly leading to heavy congestion and difficulty accessing alternative providers. The Parr Bridge Retail Park is a central hub within Mosley Common and a pharmacy at the proposed site would assist in provided an integrated health hub that is easily accessible within the community.

5.1.68 We submit that granting this application will secure improvements and better access to pharmaceutical provision and thus meets the criteria for Regulation 18.

5.1.69 We invite the Committee to grant the application."

6 **Regulation 22**

Regulation 22 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (“the Regulations”) states that the relevant Pharmaceutical Needs Assessment ("PNA") for the purpose of determining a pharmacy application is the PNA that is current at the time NHS Resolution makes the determination unless the only way to determine the application justly is with regard to an earlier PNA. Regulations 5 and 6 envisage there will be a revised PNA published by each Health and Wellbeing Board regularly. NHS Resolution noted that the original decision of the Commissioner in this matter was taken in relation to an earlier PNA. In the interests of transparency and fairness, NHS Resolution sought to rely on the discretion afforded in paragraph 7 of Schedule 3 of the Regulations to vary the normal procedures and to add an additional round of observations on this matter. The following comments were received.

6.1 HEALTHCARE PLUS CONSULTING LTD ON BEHALF OF THE APPLICANT

6.1.1 “Thank you for your letter dated 13th October 2025. We would like to take this opportunity to respond on behalf of our client to comments made regarding the newly published PNA.

Regulation 18

6.1.2 We recognise that the Wigan 2025 PNA has identified a future need in Mosley Common. We submit that in doing so the present opportunity for improvements and better access we have identified have been overlooked, leaving local residents lacking proper access to a pharmacy.

6.1.3 We submit that Regulation 18 remains the appropriate regulation for the present application. We note that the present application still complies with Regulation 18(1): [quoted in full]

6.1.4 Both the 2022 and 2025 Wigan PNAs have not noted the *present* opportunity for improvements or better access that would be secured by a pharmacy at the proposed location, meaning the application should be considered under regulation 18.

6.1.5 These improvements and better access have been highlighted in detail throughout previous correspondence and further evidenced by the letters of support in the observations which we urge the committee to read in full to fully comprehend the severity of the situation.

6.1.6 We include below some key points which demonstrate the lack of pharmaceutical provision within Mosley Common, which emphasise that improvements or better access would be secured by granting this application.

Current lack of provision

6.1.7 Page 68 of the 2025 Wigan PNA states that most of the population live within 1km of a pharmacy and that “the commonest factor influencing people’s choice of which pharmacy to use was proximity to where the person lived and proximity to their general practice”. As highlighted in

previous correspondence, using our proposed site as an arbitrary marker, the nearest pharmacy is 1.77km away, which is significantly in excess of the 1km distance as stipulated in the Wigan PNA. This is especially pertinent when we consider the GP practice is located within Mosley Common, residents consequently do not have a pharmacy located within proximity of their home nor GP Surgery, which the PNA identified as the two most common factors influencing choice of pharmacy, a clear demonstration of the improvements and better access that this application would secure.

6.1.8 The Committee will be aware that Boothstown Medical Centre is also located in the heart of Mosley Common. We note that the PNA sets a barometer for the distance between GP services and pharmaceutical provision, stating that "84% of general practices (including branch surgeries) have a pharmacy within 1km…." (Wigan PNA 2025, pg.71). When we consider that the distance between Boothstown Medical Centre and the nearest pharmacy is 1.77km, significantly over the 1km parameter that only 16% of GPs fall under, and accounting for the population density in the area, it is clear that patients of Boothstown Medical Centre do not have reasonable access and choice to pharmaceutical provision. We reiterate that proximity to a GP surgery is one of the two most common factors in influencing choice of pharmacy, further emphasising the lack of reasonable choice for local residents.

6.1.9 The 2025 Wigan PNA also states that "91% of the public survey respondents who travelled to the pharmacy either travelled by car or walked", it then goes onto identify 15-minute travel criteria. The letters of support clearly evidence that residents currently face frequent journey times of between 30 and 45 minutes to travel to the nearest pharmacy, clearly in excess of the PNA's criteria. Again, we submit that these improvements or better access that would be secured by granting this application were not considered within the PNA.

6.1.10 Mosley Common has been rapidly expanding over recent years, the 2022 Wigan PNA identified 365 houses across the locality, but the 2025 PNA explicitly states that Mosley Common had "considerable development which exceeded the expectation during the period covered by the previous PNA" (pg.49). The considerable developments over recent years have led to a large reliant population who are clearly struggling to access a pharmacy; whilst we recognise that more developments are expected to occur, hence the admission of a future need, it is unknown whether these developments will come to fruition within the lifetime of the PNA or at all. Granting this application today would secure improvements and better access that have not been foreseen within the PNA. The patient experiences gathered through the letters of support highlight that a pharmacy in the area is of immediate concern, this was validated by comments from a local MP, councillors, and Doctors.

6.1.11 When assessing the urgent need for a pharmacy in Mosley Common, it is also important to consider the local population demographics, these details have been provided through previous correspondence, but the key statistics are re-inserted below:

6.1.11.1 The LSOA of the proposed site (Wigan 029D LSOA) falls under the top 20% most deprived areas nationally, the Greater Manchester ICB previously acknowledged Mosley Common itself as being a deprived area.

6.1.11.2 We highlight from the 2021 census data that 5.6% of residents living in the Wigan 029D LSOA have bad/very bad health, which is higher than the national average of 5.2%, residents near the proposed site are therefore more likely to be reliant on pharmaceutical services.

6.1.11.3 The three most relevant LSOAs (Wigan 029D, 029E, 029C) have a population density of 2,464 taken as a weighted average, which is significantly higher than the England average of 433.5. It is also reasonable to assume that this figure has significantly increased since the 2021 census, the new developments have drastically increased the population and therefore the population density of Mosley Common.

6.1.12 We reiterate that the improvements or better access that would be secured were not included within either the 2022 or 2025 PNAs. Therefore, if the committee deem the 2025 PNA as most relevant, despite a future need being identified in the new PNA, regulation 18 still applies and the application should continue to be assessed under unforeseen benefits.

Conclusion

6.1.13 Neither the 2022 nor 2025 PNA gave consideration to the improvements or better access that would be secured by a pharmacy at the proposed location, therefore regulation 18 still remains the appropriate regulation for this application regardless of which PNA is chosen as relevant.

6.1.14 For the reasons stated above, along with the letters of support and all evidence provided through previous correspondence, we invite the committee to grant this application."

6.2 PHARMACY SALES AND CONSULTANCY ON BEHALF OF DAVINA PHARMACY

6.2.1 "Thank you for your letter of 13th October inviting comments in respect of the recent publication of a new PNA for Wigan.

6.2.2 We note the following statements in the new PNA [in italics, with our comments in [standard font]):

6.2.3 Page 11

Current Pharmaceutical provision – Necessary services

8. Wigan residents have access to necessary pharmacy services (defined on page 51) through 63 community pharmacies and one appliance contractor in Wigan Borough. Residents can also access

pharmacies located in neighbouring boroughs along with a significant number of internet pharmacies nationwide which enhance choice and accessibility.

9. Based on the information within the population health profile and the neighbourhood analysis, there is adequate provision of necessary pharmacy services in Wigan Borough, with the exception of Hindley Green.

6.2.4 For the avoidance of doubt, the application by Prescription Hub Limited is not for Hindley Green.

6.2.5 Page 11 & 12

Future needs, improvements and securing better access

13. The PNA concludes that Mosley Common is expected to require additional pharmacy provision in the future due to planned housing developments in the area.

14. Housing development in Mosley Common has been considered as part of our assessment during the previous PNA period (October 2022) and the current draft PNA. While the current development includes approximately 175 new homes, our analysis draws on the Strategic Housing Land Availability Assessment (SHLAA), which identifies a broader pattern of planned and potential housing growth in the area. When considered across this longer time span, the cumulative impact of housing development is expected to increase demand for pharmaceutical services. On this basis, we have identified a future need for pharmacy provision in Mosley Common.

15. The PNA has identified a future need within Mosley Common area following the completion of the project development. The future need will be for a pharmacy providing the following services, during hours that align with the provision of GP services on Monday to Saturday as a minimum:

- *All essential services*

6.2.6 As the PNA has just been published, it is clear that the conditions referred to for the Future Need to become current have not yet materialised.

Regulation 18

6.2.7 We note that this is an application submitted under Regulation 18 to provide Unforeseen Benefits.

6.2.8 Regulation 18(1) states the following: [quoted in full]

6.2.9 The implication of this is that the NHSCB (NHS England) is required, initially, to consider whether the proposed “improvements or better access” were included within the “relevant” PNA.

6.2.10 In respect of the term ‘relevant’, when it comes to the PNA, the decision maker is required to have regard to the current PNA at the time it determines the application unless there is good cause to do otherwise.

6.2.11 As the 2025 Wigan PNA has now been published, it should be considered the current PNA for the purposes of determining this application.

6.2.12 It is very clear that the HWB have fully considered the provision of pharmaceutical services in Mosley Common when they have prepared the current PNA. Having done so they have concluded that there is a future need for pharmaceutical services provision.

6.2.13 Regulation 18(1)(b) requires the decision maker to consider whether the “improvements or better access that would be secured were or was not included in the relevant pharmaceutical needs assessment”.

6.2.14 In this case it is clear that they were included in the current PNA. That being the case, the proposed benefits are not unforeseen so the application does not meet the requirements of Regulation 18(1) and should be refused accordingly.

6.2.15 In summary, given that the PNA has just been published, it is clearly a very current reflection of the HWB’s position in respect of the existing levels of pharmaceutical services provision. That being the case there is simply no evidence that there is any current need for a pharmacy in Mosley Common.”

6.3 COMMUNITY PHARMACY GREATER MANCHESTER

6.3.1 “Thank you for your letter dated 13th October 2025, with the opportunity to provide further comments following the publication of the final 2025 Wigan Pharmaceutical Needs Assessment (PNA).

6.3.2 Community Pharmacy Greater Manchester (CPGM) applications subgroup has reviewed its’ previous submission following the publication of the PNA. We note that the final PNA identifies Mosley Common as an area of future need rather than an existing gap in pharmaceutical provision. This refers to potential future population and housing changes expected over the coming years, not to any existing lack of access to pharmacy services.

6.3.3 The applicant’s original submission was made under the Regulation 18 – unforeseen benefits. That route requires applicants to demonstrate that circumstances have arisen since the publication of the relevant PNA which were unforeseen, and which result in significant benefits for patients that could not reasonably have been anticipated during the PNA process.

6.3.4 As set out in our earlier response, CPGM maintains that the circumstances described in this application, including local housing growth, demographic change, and existing patterns of pharmacy use, were foreseeable and were considered within the PNA process. The identification of Mosley Common as a future need in the final PNA

confirms that these developments were anticipated rather than unforeseen.

6.3.5 The PNA does not recognise an existing gap in provision that would justify approval of an application under Regulation 18.

6.3.6 In summary, whilst CPGM acknowledges the PNA's recognition of Mosley Common as a potential area for future development, this does not alter our original position that the current application does not meet the criteria for unforeseen benefits under Regulation 18.

6.3.7 CPGM applications subgroup would welcome ongoing engagement as the Wigan PNA implementation is monitored, including any future reviews should population or service pressures substantiate the identified future need."

7 Consideration

7.1 The Pharmacy Appeals Committee ("the Committee"), appointed by NHS Resolution, had before it the papers considered by the Commissioner, together with a plan of the area showing existing pharmacies and doctors' surgeries and the location of the proposed pharmacy.

7.2 It also had before it the responses to NHS Resolution's own statutory consultations.

7.3 On the basis of this information, the Committee considered it was not necessary to hold an Oral Hearing.

7.4 The Committee had regard to the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 ("the Regulations").

Regulation 31

7.5 The Committee first considered Regulation 31 of the Regulations which states:

(1) A routine or excepted application, other than a consolidation application, must be refused where paragraph (2) applies.

(2) This paragraph applies where -

(a) a person on the pharmaceutical list (which may or may not be the applicant) is providing or has undertaken to provide pharmaceutical services ("the existing services") at or from -

(i) the premises to which the application relates, or

(ii) adjacent premises; and

(b) NHS England is satisfied that it is reasonable to treat the services that the applicant proposes to provide as part of the same service as the existing services (and so the premises to which the application relates and the existing listed chemist premises should be treated as the same site).

7.6 The Committee noted that the Applicant responded "*N/a. There is no pharmacy trading from or adjacent to the proposed premises so Regulation 31 does not apply*". In its decision letter, the Commissioner had stated "*No, the application is not to be refused under Regulation 31.*" The Committee noted that this had not been disputed on appeal and determined that it was not required to refuse the application under the provisions of Regulation 31.

7.7 The Committee noted that, if the application were granted, the successful applicant would – in due course – have to notify the Commissioner of the precise location of its premises (in accordance with paragraph 31 of Schedule 2). Such a notification would be invalid (and the applicant would not be able to commence provision of services) if the location then provided would (had it been known now) have led to the application being refused under Regulation 31.

Regulation 18

7.8 The Committee noted that this was an application for "unforeseen benefits" and fell to be considered under the provisions of Regulation 18 which states:

"(1) If—

(a) NHS England receives a routine application and is required to determine whether it is satisfied that granting the application, or granting it in respect of some only of the services specified in it, would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in the area of the relevant HWB; and

(b) the improvements or better access that would be secured were or was not included in the relevant pharmaceutical needs assessment in accordance with paragraph 4 of Schedule 1,

in determining whether it is satisfied as mentioned in section 129(2A) of the 2006 Act (regulations as to pharmaceutical services), NHS England must have regard to the matters set out in paragraph (2).

(2) Those matters are—

(a) whether it is satisfied that granting the application would cause significant detriment to—

(i) proper planning in respect of the provision of pharmaceutical services in the area of the relevant HWB, or

(ii) the arrangements NHS England has in place for the provision of pharmaceutical services in that area;

(b) whether, notwithstanding that the improvements or better access were not included in the relevant pharmaceutical needs assessment, it is satisfied that, having regard in particular to the desirability of—

(i) there being a reasonable choice with regard to obtaining pharmaceutical services in the area of the relevant HWB (taking into account also NHS England's duties under sections 13I and 13P of the 2006 Act (duty as to patient choice and duty as respects variation in provision of health services)),

(ii) people who share a protected characteristic having access to services that meet specific needs for pharmaceutical services that, in the area of the relevant HWB, are difficult for them to access (taking into account also NHS England's duties under section 13G of the 2006 Act (duty as to reducing inequalities)), or

(iii) there being innovative approaches taken with regard to the delivery of pharmaceutical services (taking into account also NHS England's duties under section 13K of the 2006 Act (duty to promote innovation)),

granting the application would confer significant benefits on persons in the area of the relevant HWB which were not foreseen when the relevant pharmaceutical needs assessment was published;

(c) whether it is satisfied that it would be desirable to consider, at the same time as the applicant's application, applications from other persons offering to secure the improvements or better access that the applicant is offering to secure;

(d) whether it is satisfied that another application offering to secure the improvements or better access has been submitted to it, and it would be desirable to consider, at the same time as the applicant's application, that other application;

(e) whether it is satisfied that an appeal relating to another application offering to secure the improvements or better access is pending, and it would be desirable to await the outcome of that appeal before considering the applicant's application;

(f) whether the application needs to be deferred or refused by virtue of any provision of Part 5 to 7.

(g) whether it is satisfied that the application presupposes that a gap in pharmaceutical services provision has been or is to be created—

(i) by the removal of chemist premises from a pharmaceutical list as a consequence of the grant of a consolidation application, and

(ii) since the last revision of the relevant HWB's pharmaceutical needs assessment other than by way of a supplementary statement.

(3) NHS England need only consider whether it is satisfied in accordance with paragraphs (2)(c) to (e) if it has reached at least a preliminary view (although this may change) that it is satisfied in accordance with paragraph (2)(b)."

7.9 The Committee considered that Regulation 18(1)(a) was satisfied in that it was required to determine whether it was satisfied that granting the application, or granting it in respect of some only of the services specified in it, would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in the area of the relevant Health and Wellbeing Board ("HWB").

7.10 The Committee went on to consider whether Regulation 18(1)(b) was satisfied, i.e. whether the improvements or better access that would be secured if the application was granted were or was included in the Pharmaceutical Needs Assessment ("the PNA") in accordance with paragraph 4 of Schedule 1 of the Regulations.

7.11 Paragraph 4 of Schedule 1 requires the PNA to include: "a *statement of the pharmaceutical services that the HWB had identified (if it has) as services that are not provided in the area of the HWB but which the HWB is satisfied (a)* ***would*** *if they were provided….secure improvements or better access, to pharmaceutical services… (b)* ***would*** *if in specified future circumstances they were provided…secure future improvements or better access to pharmaceutical services…"* (emphasis added).

7.12 The Committee noted that Regulation 22 states:

"*Refusal of routine applications that are based on neither a pharmaceutical needs assessment nor unforeseen benefits*

(1) If NHS England receives a routine application to which regulation 19(6) does not apply, NHS England must refuse it unless granting it, or granting it in respect of some only of the services specified in it, would–

(a) meet a current or future need for pharmaceutical services, or a pharmaceutical services of a specified type, in the area of the relevant HWB that has been included in the relevant pharmaceutical needs assessment in accordance with paragraph 2 of Schedule 1; or

(b) secure (including in the future) improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in the area of the relevant HWB that have or has been included in the relevant pharmaceutical needs assessment in accordance with paragraph 4 of Schedule 1.

(2) For the purposes of paragraph (1), the relevant pharmaceutical needs assessment is–

(a) the pharmaceutical needs assessment of the relevant HWB that is current at the time that NHS England takes it decision to grant or refuse the application, unless in the opinion of NHS England (or on appeal the Secretary of State) the only way to determine the application justly is with regard to an earlier pharmaceutical needs assessment, in which

case the relevant pharmaceutical needs assessment is that earlier assessment, or

(b) if the relevant HWB has not published a pharmaceutical needs assessment, the pharmaceutical needs assessment of a Primary Care Trust (as extended by regulation 7(1)) that relates to the locality in which the location or premises to which the application relates is or are situated.

7.13 The Committee noted that the Commissioner had made its determination against the 2022 PNA and that the Applicant had referenced both the 2022 PNA and the draft 2025 PNA during the application and subsequent appeal process.

7.14 The Committee considered that there were two related issues that it needs to determine in relation to the PNA. It needed to determine which PNA was the relevant PNA for the purposes of Regulation 22 and whether the relevant PNA had identified the improvements or better access that the application was looking to secure.

7.15 In considering these issues, the Committee had regard to the comments made by the parties.

7.16 The Committee considered that the starting point as set out in Regulation 22 was that the relevant PNA was the PNA of the relevant HWB that is current at the time that the decision is taken. There is no dispute that the 2025 PNA is the current PNA.

7.17 The Committee considered the 2025 PNA prepared by Wigan HWB, conscious that the document provides an analysis of the situation as it was assessed at the date of publication. The Committee bears in mind that, under Regulation 6(2), the body responsible for the PNA must make a revised assessment as soon as reasonably practicable unless to do so appears to be a disproportionate response to those changes. Where it appears disproportionate, the responsible body may, but is not obliged to, issue a supplementary statement under Regulation 6(3). Such a statement then forms part of the PNA. The Committee noted that the PNA was dated September 2025 and that no supplementary statements had been issued.

7.18 The Committee noted the conclusion of the PNA in "Key Findings and Recommendations" which states:

"Current Pharmaceutical provision – Necessary services

8. Wigan residents have access to necessary pharmacy services (defined on page 51) through 63 community pharmacies and one appliance contractor in Wigan Borough. Residents can also access pharmacies located in neighbouring boroughs along with a significant number of internet pharmacies nationwide which enhance choice and accessibility.

9. Based on the information within the population health profile and the neighbourhood analysis, there is adequate provision of necessary

pharmacy services in Wigan Borough. However, following the recent closure of a pharmacy, an exception has been identified in Hindley Green within the Ince, Hindley, Abram and Platt Bridge Neighbourhood.

10. This PNA concludes that there is a current need for a pharmacy providing the following services, during hours that align with the provision of GP services on Monday to Saturday as a minimum, in Hindley Green:

- *All essential services*
- *Pharmacy First service"*

7.19 The PNA went on to state:

"Future needs, improvements and securing better access

12. The PNA concludes that Mosley Common is likely to require additional pharmacy provision in the future due to planned housing developments in the area. This anticipated growth builds upon the residential expansion that has already occurred during the previous PNA period. The cumulative impact of past and future housing developments is likely to increase demand for pharmaceutical services in the locality.

13. The anticipated need in Mosley Common will be for a pharmacy providing the following services, during hours that align with the provision of GP services on Monday to Saturday as a minimum:

- *All essential services*
- *Pharmacy First service"*

7.20 The Committee further noted that the location of the proposed pharmacy is within Tyldesley which is considered as part of "Neighbourhood 2 – Tyldesley and Atherton" in the PNA under the 'Analysis of pharmacy services by neighbourhood'.

7.21 The Committee noted that the PNA states "*There are eight pharmacies in this neighbourhood and there is a good choice of provider"* and that comments about an additional need in Mosley Common related to being in the future.

7.22 The Committee noted that the PNA had considered accessibility for those within the neighbourhood and had stated:

"337. Pharmacy services are well distributed throughout the neighbourhood around the main areas of population. Almost every GP practice has a pharmacy within one kilometre, meaning people can access a pharmacy either near where they live or close to their GP practice within this neighbourhood. All eight pharmacies provide a delivery service, supporting those people less able to travel to the pharmacy.

338. All have parking either on site or nearby and all are accessible by public transport.

339. Details of individual pharmacy opening times can be found on the NHS website (www.nhs.uk) using the "find a pharmacy" tool. Pharmacy opening hours in this neighbourhood cover the following periods:

- *Monday – Saturday: 8:30am – 9pm*
- *Sunday: 8:30am – 9:30pm*

340. Pharmacy services are available at all times when GP practices within the neighbourhood are open."

7.23 The Committee noted the conclusion for "Neighbourhood 2 – Tyldesley and Atherton" of the PNA which states:

"Conclusion

352. Overall, considering accessibility and the range of services on offer, there is a good choice of provider and good level of service delivery.

353. Future anticipated growth builds upon the residential expansion that has already occurred during the previous PNA period. The cumulative impact of past and future housing developments is likely to increase demand for pharmaceutical services.

354. The additional need within Mosley Common will be for a pharmacy providing the following services, during hours that align with the provision of GP services on Monday to Saturday as a minimum:

- *All essential services*
- *Pharmacy First service"*

7.24 Whilst the Committee noted the references in the PNA to a "current need", this was for Hindley Green which is not the location of the proposed pharmacy and therefore took no further view on this statement from the HWB.

7.25 The Committee noted that the Applicant seeks to provide unforeseen benefits to the patients of Boothstown Medical Centre as well as the residents in the surrounding area of Mosely Common.

7.26 Whilst the Committee noted the reference in the PNA to Mosley Common it also noted the wording used and that this was for a future need and further that there was no definite need identified. The Committee was of the view that the improvements or better access that the Applicant was claiming would be secured by its application, whilst referenced in the PNA were not included in the relevant PNA in accordance with paragraph 4 of Schedule 1.

7.27 In order to be satisfied in accordance with Regulation 18(1), regard is to be had to those matters set out at 18(2). The Committee's consideration of the issues is set out below.

Regulation 18(2)(a)(i)

7.28 The Committee had regard to

> *"(a) whether it is satisfied that granting the application would cause significant detriment to—*
>
> *(i) proper planning in respect of the provision of pharmaceutical services in the area of the relevant HWB"*

7.29 The Committee noted the conclusion of the Commissioner that it does "*not consider that it would*" in respect of whether the application would cause significant detriment to the proper planning in respect of the provision of pharmaceutical services in the area of the relevant HWB. The Committee noted that this had not been disputed either on appeal or in subsequent representations.

7.30 On the basis of the information available, the Committee was not satisfied that, if the application were to be granted and the pharmacy to open, the ability of the Commissioner thereafter to plan for the provision of services would be affected in a significant way.

7.31 The Committee was therefore not satisfied that significant detriment to the proper planning of pharmaceutical services would result from a grant of the application.

Regulation 18(2)(a)(ii)

7.32 The Committee had regard to

> *"(a) whether it is satisfied that granting the application would cause significant detriment to— …*
>
> *(ii) the arrangements NHS England has in place for the provision of pharmaceutical services in that area"*

7.33 The Committee noted that the Commissioner had again concluded that it does "*not consider that it would"* in respect of whether the application would cause significant detriment to the arrangements that NHS England has in place. The Committee noted that this had also not been disputed either on appeal or in subsequent representations.

7.34 The Committee was therefore not satisfied that significant detriment to the arrangements currently in place for the provision of pharmaceutical services would result from a grant of the application.

7.35 In the absence of any significant detriment as described in Regulation 18(2)(a), the Committee was not obliged to refuse the application and went on to consider Regulation 18(2)(b).

Regulation 18(2)(b)

7.36 The Committee had regard to

"(b) whether, notwithstanding that the improvements or better access were not included in the relevant pharmaceutical needs assessment, it is satisfied that, having regard in particular to the desirability of—

(i) there being a reasonable choice with regard to obtaining pharmaceutical services in the area of the relevant HWB (taking into account also NHS England's duties under sections 13I and 13P of the 2006 Act (duty as to patient choice and duty as respects variation in provision of health services)),

(ii) people who share a protected characteristic having access to services that meet specific needs for pharmaceutical services that, in the area of the relevant HWB, are difficult for them to access (taking into account also NHS England's duties under section 13G of the 2006 Act (duty as to reducing inequalities)), or

(iii) there being innovative approaches taken with regard to the delivery of pharmaceutical services (taking into account also NHS England's duties under section 13K of the 2006 Act (duty to promote innovation)),

granting the application would confer significant benefits on persons in the area of the relevant HWB which were not foreseen when the relevant pharmaceutical needs assessment was published"

Regulation 18(2)(b)(i) to (iii)

7.37 The Committee had regard to the location of the existing pharmacies and GP surgeries as provided on the map by the Commissioner, which had not been disputed by any party.

7.38 The Committee noted that the Applicant was proposing to open a pharmacy within the vicinity of existing medical provision in the Parr Bridge Retail Park area of the wider locality of Mosley Common. The Committee noted the comments from the Applicant that there is no pharmacy located in the vicinity of Boothstown Medical Centre and that as a result there is not reasonable choice for those who require pharmaceutical services after a visit to the GP practice or are resident in the area.

7.39 The Committee noted that the application had been based upon the 2022 PNA however the Committee was mindful that the PNA has been replaced with a new PNA dated September 2025 and that no gaps in pharmaceutical provision had been identified.

7.40 The Committee sought to understand, from the information before it, the nature of the population of the area. The Committee noted the comments from the Applicant with regard to the levels of deprivation. The Committee noted that the Applicant had used various different Lower Layer Super Output Area (LSOA) levels within the borough which, due to the density of population in the area as well as the deprivation levels, together with the distance from the medical centre to the existing pharmacy provision led it to the conclusion that a pharmacy was required in the Parr Bridge Retail Park.

7.41 The Committee, on considering the various maps provided, noted that some of these areas covered large open spaces in which there were no residential properties. The Committee also noted the large best estimate address given by the Applicant, and whilst it had provided a more narrow postcode in subsequent representations, it was mindful that it is the original best estimate address to which it has to have regard.

7.42 The Committee further noted the comments from the Applicant with regard to the amenities and facilities in the area of postcode M29 8RZ, however as set out above, the Committee was mindful that this is one area within the best estimate given by the Applicant.

7.43 The Committee did not doubt that there were services and amenities which were used by persons in the area, in particular those in the retail park, however the Committee was of the view that these are limited, and people will go outside of the area and in doing so, are able to access the existing pharmaceutical services in the area.

7.44 The Committee noted the undisputed comments that there are 4 pharmacies located within 1.5 miles of the proposed site.

7.45 The Committee considered access to existing pharmacies on foot. The Committee noted that the distance to the nearest pharmacies had not been disputed and that the Applicant had provided limited information regarding the routes which may be taken. The Committee noted the comment from the Applicant with regard to the "guided busways" which could be a barrier to movement in the area, however the Committee was of the view that for those residing in the area they would be familiar with them and how to navigate and access services on either side. The Committee did not see this as a barrier to movement.

7.46 The Committee further noted the comments from the Applicant with regard to the actual distance to the existing pharmacies. The Committee was mindful that, given that this was a best estimate address, choosing the medical centre was an arbitrary point for those accessing services on foot as this was not located in the residential area but in the retail park and there was very little information provided as to how many patients would commence their journey from the medical centre. The Committee noted the Applicant's comments about existing pharmacies "not in walking distance" but was mindful that this was a subjective statement and, other than distance, no further information had been provided with regard to accessing pharmacies on foot. Further, the Committee was mindful that the granting of a new pharmacy would not necessarily mean that it would then be "within walking distance" as what could be considered walking distance for some, would not be for others. Apart from distance and having to cross the guided busway, the Committee was of the view that there would be persons who are able and willing to access the existing pharmacies and that there was nothing provided to demonstrate that those who are able to access existing pharmaceutical provision by foot were currently experiencing any difficulties in doing so.

7.47 The Committee was mindful that there would be some who would choose not to access services on foot, or who are unable to access services on foot, for

whatever reason. The Committee therefore went on to consider the ease and level of access to pharmacies by private and public transport.

7.48 The Committee noted the comments from the Applicant with regard to the location being in a deprived area but that car ownership is not a measure in respect of the LSOA areas. Conversely Pharmacy Sales and Consultancy had provided information indicating high car ownership. The Committee noted the comments with regard to car travel times as well as some of the comments from members of the public in respect of journey times. The Committee noted the comments and statements regarding traffic in the area, however, was of the view that this was nothing exceptional in the context of the location, especially given that the proposed site encompassed the retail park, which would be accessed by many by car. The Committee further noted that there was parking available at the existing pharmacies as stated in the PNA "*All have parking either on site or nearby …"*, which had not been disputed by the Applicant. The Committee noted the limited information provided by the Applicant with regard to actually accessing existing pharmacies by car. The Committee concluded that for those who did have access to private transport, there was nothing provided by the Applicant to demonstrate that they were currently having difficulties in accessing the existing pharmaceutical provision in the area of the HWB.

7.49 The Committee noted the comments from the Applicant with regard to the bus services in the area as well as the frequency of some of the bus services but noted that it had been provided with limited information in this regard. The Committee noted the comments from residents , however it was unclear to the Committee from the information before it which services were being referred to. The Committee also noted comments from parties in particular those that use the "busway" "*travel this route every 8 minutes*" and that the area is "*well connected by regular bus services to Tyldesley, Walkden, Astley and Boothstown*". The Committee further noted the comments from the 2025 PNA which states under 'Accessibility' that "*… all are accessible by public transport."* The Committee considered a bus [to Tims and Parker] every 30 minutes as reasonable. The Committee was mindful that those who did use public transport, especially if they were using it to access medical provision in the area, would be aware of the services and times. The Committee found it difficult to assess the extent to which patients were using public transport but was of the view that there was nothing provided to demonstrate that for those who were reliant on public transport that they were currently having difficulties accessing the existing pharmaceutical provision in the area of the HWB.

7.50 The Committee noted the Applicant's comments regarding the provision of services of existing pharmacies in the area, including Google reviews of the pharmacy and considered comments therein.

7.51 The Committee was mindful that, if there were any issues with regard to the existing pharmaceutical services in the area that this was not the correct forum for these comments and that they should be raised with the Commissioner. The Committee considered that selective poor reviews as well as performance issues should not be a reason to completely discount the existence of pharmacies in the area when considering whether there is reasonable choice. Further, the Committee was of the view that the 2025 PNA had been out to consultation and that this was the opportunity for patients to provide comments

on the provision of pharmaceutical services in the area. The Committee noted that the 2025 PNA, following in depth consultations and a review of the current situation as it is now, had concluded that there was no gap in provision. The Committee was of the view that it is the ICB's role as commissioner of pharmaceutical services to act on reports of negative service.

7.52 The Committee noted the comments from patients and residents in the area, which the Committee noted that for the large numbers of people in the area, the comments provided were comparatively from a small sample of the patients and residents of the area and was unsure if this was representative of those residing in the area as a whole. The Committee further noted that whilst the Applicant had split each of the comments down into various sections so that they looked voluminous, the overall responses remained a relatively small sample of the population of the area. The Committee was also mindful that the Applicant was relying on comments from those who were registered with the Boothstown Medical Practice and was unsure how these views and comments had been sought.

7.53 The Committee noted the comments from the Applicant with regard to the new developments in the area. The Committee was mindful that the PNA had considered new developments in the area and that "Tyldesley and Mosley Common: North of Mosley Common (175)" was identified in the PNA. The Committee further noted that the PNA had considered if pharmaceutical provision was sufficient and noted the conclusions that there could be an "additional need within Mosley Common" however this was a potential future gap in provision. The Committee was of the view that the new developments which were either already built or were proposed had been taken into account when the PNA was drafted and that there was nothing provided by the Applicant which demonstrated that the instant application was required at present to fulfil any perceived gap in provision.

7.54 Taking all of the above into consideration, the Committee was of the view that there is already reasonable choice with regard to obtaining pharmaceutical services in the area of the relevant HWB, such that it was not satisfied that, having regard to the desirability of there being a reasonable choice with regard to obtaining services, granting the application would confer significant benefits on persons.

7.55 In considering Regulation 18(2)(b)(ii) the Committee reminded itself that it was required to address itself to people who share a protected characteristic under the Equality Act 2010 (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation) having access to services that meet specific needs for pharmaceutical services that, in the relevant area, are difficult for them to access. Whilst the Committee noted the general comments from the Applicant with regard to the link between deprivation and health, the Committee was of the view that there was little or no evidence of specific pharmaceutical needs. The issue of access and choice as might apply to these person was dealt with in the assessment of reasonable access discussed above ad the Committee was mindful that there will always be people who share a protected characteristic.

7.56 The Committee was therefore not satisfied that, having regard to the desirability of people who share a protected characteristic having access to services that meet specific needs for pharmaceutical services that are difficult for them to access, granting the application would confer significant benefits on persons.

7.57 In considering Regulation 18(2)(b)(iii) the Committee had regard to the desirability of innovative approaches to the delivery of pharmaceutical services. In doing so, the Committee would consider whether there was something more over and above the usual delivery of pharmaceutical services that might be expected from all pharmacies, some 'added value' on offer at the location. The Committee noted that the Applicant was not seeking to rely on innovation in this application. The Committee was not satisfied that, having regard to the desirability of there being innovative approaches taken with regard to the deliverability of pharmaceutical services, granting the application would confer significant benefits on persons.

Regulation 18(2)(b) generally

7.58 The Committee noted that the Applicant was proposing to open for 44 hours a week of which 40 would be core hours. The Committee noted that there would be provision of pharmaceutical services from 9am to 1pm and 2pm to 6pm Monday to Friday with all of these hours being core hours. The Committee noted that the Applicant was also proposing to open on a Saturday morning from 9am to 1pm which would be supplementary hours. The Committee noted that the Applicant was not proposing to offer any hours, either core or supplementary on a Saturday afternoon or on a Sunday.

7.59 The Committee noted the comments in the PNA with regard to the provision of hours and that there was pharmaceutical services in the Tyldesley and Atherton neighbourhood from 8:30am to 9pm Monday to Saturday as well as from 8:30am to 9:30pm on a Sunday. The Committee was of the view that there was no information provided to support a finding that pharmaceutical services are not currently provided at such times as needed and therefore it was not satisfied that, having regard to the desirability of there being a reasonable choice with regard to obtaining services, granting the application would confer significant benefits (in relation to opening hours) on persons.

7.60 The Committee has considered whether there are any other factors that would confer significant benefits including on patients who share protected characteristics. The Committee had regard to the need to eliminate discrimination and advance equality of opportunity and foster good relations between these patients and those who do not share their protected characteristics.

7.61 The Committee was of the view that in accordance with Regulation 18(2)(b) the granting of this application would not confer significant benefits on persons in the area of the HWB which were not foreseen when the PNA was published.

Other considerations

7.62 Having determined that Regulation 18(2)(b) had not been satisfied, the Committee did not need to have regard to Regulation 18(2)(c) to (e).

7.63 No deferral or refusal under Regulation 18(2)(f) was required in this case.

7.64 The Committee had regard to Regulation 18(2)(g) and found that it did not apply in this case.

7.65 The Committee considered whether there were any further factors to be taken into account and concluded that there were not.

7.66 The Committee was not satisfied that the information provided demonstrates that there is difficulty in accessing current pharmaceutical services such that a pharmacy at the proposed site would provide better access to pharmaceutical services.

7.67 Pursuant to paragraph 9(1)(a) of Schedule 3 to the Regulations, the Committee may:

7.67.1 confirm the Commissioner's decision;

7.67.2 quash the Commissioner's decision and redetermine the application;

7.67.3 quash the Commissioner's decision and, if it considers that there should be a further notification to the parties to make representations, remit the matter to the Commissioner.

7.68 Although the Committee had reached the same conclusion as the Commissioner, it was mindful that it had been provided with more information on appeal and had considered the application against the 2025 PNA. In those circumstances, the Committee determined that the decision of the Commissioner must be quashed.

7.69 The Committee went on to consider whether there should be a further notification to the parties detailed at paragraph 19 of Schedule 2 of the Regulations to allow them to make representations if they so wished (in which case it would be appropriate to remit the matter to the Commissioner) or whether it was preferable for the Committee to redetermine the application.

7.70 The Committee noted that representations on Regulation 18 had been sought from parties by the Commissioner and representations had already been made by parties to the Commissioner in response. These had been circulated and seen by all parties as part of the processing of the application by the Commissioner. The Committee further noted that when the appeal was circulated representations had been sought from parties on Regulation 18.

7.71 The Committee concluded that further notification under paragraph 19 of Schedule 2 would not be helpful in this case.

8 DECISION

8.1 The Pharmacy Appeals Committee ("Committee"), appointed by NHS Resolution, quashes the decision of the Commissioner, for the reasons given above, and redetermines the application.

8.2 The Committee concluded that it was not required to refuse the application under the provisions of Regulation 31.

8.3 The Committee has considered whether the granting of the application would cause significant detriment to proper planning in respect of the provision of pharmaceutical services in the area covered by the HWB, or the arrangements in place for the provision of pharmaceutical services in that area and is not satisfied that it would;

8.4 The Committee determined that the application should be refused on the following basis:

8.4.1 In considering whether the granting of the application would confer significant benefits, the Committee determined that –

8.4.1.1 there is already a reasonable choice with regard to obtaining pharmaceutical services;

8.4.1.2 there is no evidence of people sharing a protected characteristic having difficulty in accessing pharmaceutical services; and

8.4.1.3 there is no evidence that innovative approaches would be taken with regard to the delivery of pharmaceutical services;

8.4.2 Having taken these matters into account, the Committee is not satisfied that granting the application would confer significant benefits as outlined above that would secure improvements or better access to pharmaceutical services.

Case Manager
Primary Care Appeals